

Rise Summer Camp 2019 Registration

Childs Name _____ Age _____

Parents Name _____

Address _____ City _____ State _____ Zip _____

Email _____

Phone # _____ (work/ cell/ home) 2nd Phone # _____ (work/ cell/ home)

Emergency Contact Name _____ Phone # _____

Does your child currently have any health concerns, injuries, allergies or anything that can prohibit them from participating in any of the activities? Y / N
If yes, please describe.

What days will they be attending? (Circle one)

	Full Week (Circle Week)	Single Day (Circle Day)
6/3/19-6/7/19	MONDAY - FRIDAY	M T W TH F

Cost:

Daily - \$45 / \$40 Sibling
Weekly - \$200 / \$175 Sibling

Amount Paid _____ **Remaining Balance** _____

CAMP POLICIES FAMILIES WHO REGISTER FOR CAMP ARE EXPECTED TO FOLLOW THE POLICIES SET FORTH BELOW OR FORFEIT FUTURE CAMP ATTENDANCE.

- 50% down payment of camp tuition is due upon registration to reserve your space. The balance of camp is due the first day of camp.
- Full payment for single week camps and full payment for single days is due upon registration to reserve your space.
- Camp payments are non-refundable, but may be credited toward your account only if we are able to fill your space. A credit request form must be filled out to be eligible to receive credit. Any changes in attendance may be done without penalty until Saturday, May 23rd .
- Any changes / additions / deletions made to registration must be made on the original registration form and done in person or in writing, not verbally. Please check your personal and school calendar before making a deposit for camp.
- Parents are required to sign in their child(ren) and identify the pick-up person each day.
- Photos taken may be used for advertisement purposes.
- Parents will be called to pick up a child who is jeopardizing the safety or camp experience of others.
- Kids who are not picked up on time may be denied future camp attendance.

Waiver, Release and Indemnity agreement

Important: This release is a legal contract binding upon you, Rise Combat Sports LLC; it's associates and employees. Read carefully and obtain legal assistance if you do not understand it.

I, the undersigned, acknowledge and state that I have voluntarily applied to become a member or guest of and to participate in the activities of Rise Combat Sports. Including but limited to, the instruction, techniques and methods known as "Muay Thai, Boxing, Brazilian Jiu Jitsu, MMA and Fitness". I am aware and understand that Muay Thai, Boxing, Brazilian Jiu Jitsu, MMA and Fitness are potentially dangerous activities. I am voluntarily on my own free will submitting an application for membership, becoming a member, and learning and participating in the Rise Combat Sports methods with full knowledge and understanding of the serious potential danger and hazards involved. I hereby consent and agree to completely accept alone any and all risks on injury and death. I also acknowledge and understand that the performance, practice and utilization of Rise Combat Sports methods involve extremely strenuous activity, and that I have been advised to consult a physician before commencing and undertaking such activity. I hereby represent that, to the best of my knowledge, I am in good physical health and condition, sufficient to undertake activities and practice of Rise Combat Sports. I hereby declare that I have read this release from liability, and that I fully understand the meaning and importance of its contents. I acknowledge that this release is a binding contract among Rise Combat Sports and its associates; and that under contract I am releasing Rise Combat Sports and its associates from all liability for claims I may have against them. I further declare that I am at least 18 years of age, that I have full legal capacity to be bound by this contract, and that I am signing this contract on my own free will and accord.

Parent / Guardian Signature Here

x _____ Date _____