



SportsLife Camps is coming!



ARE YOU READY?



SportsLife Camps is coming to **Living Word Church** for an amazing week of sports, arts, and Outrageous Fun!!!

Where? Living Word United Methodist Church, 17315 Manchester Road

When? Monday, July 19 – Friday, July 23 Camp begins at 9:00am, and it goes until 12:00pm

Bring kids for check-in no earlier than **8:35 am**, and pick them up at **12:00pm**. Check-in and check-out will take place **just inside the main front doors**. Kids must be checked in and out each day of camp!

What? Main Events to choose from – Soccer/Ult Frisbee, Dance/Cheerleading, Arts, Basketball/Street Hockey

Each child will choose a sport or art to focus on for their week of camp, please indicate your child's first and second Main Event choice below.

Who can come? Kids who will enter 1st – 5th grade in the fall of 2010

How much? The cost is **\$65** for the entire week of camp. Make checks payable to **Living Word**.

How to sign up? Fill out the registration form attached below and turn it in, along with your payment, to **Cindy Brown** at **Living Word UMC, 17315 Manchester Rd., Wildwood, MO 63038**

Questions Contact **Sara Cleary, 636-821-2800** with any questions.

Note: Below is an initial registration form to hold your child's spot. You must also turn in a completed and signed SportsLife Camps Participant Release Form before your child can participate in SportsLife Camp. You can obtain this form from our website, www.livingwordumc.org.

Family Last Name: _____

Child's Names and Age: _____ **Main Event Choice 1:** _____ **Choice 2:** _____

Child's Names and Age: _____ **Main Event Choice 1:** _____ **Choice 2:** _____

Child's Names and Age: _____ **Main Event Choice 1:** _____ **Choice 2:** _____

Parent/Guardian Information (first, last): _____ **Cell Phone:** _____

Would you be willing to volunteer during the SportsLife Camps week? Yes or No

Email: _____

SportsLife Camps 2010 Participant Release Form Campers and Volunteers (adult and youth)

Participant Information: Please print clearly with a pen.		
Name of Camper/Volunteer: <i>Last, First, Middle Initial</i>	Age: <i>(Campers only)</i>	Grade Entering: <i>(Campers only)</i>
Address: <i>Street, City, State, Zip</i>		
Camper/Youth Volunteer Parent/Guardian Name and Phone Numbers:		
<i>Name:</i>	<i>Day: ()</i>	<i>Evening: ()</i>
Emergency Contact #1 (for campers and volunteers):		Relationship to Participant:
<i>Name:</i>	<i>Day Phone: ()</i>	
	<i>Cell Phone: ()</i>	
Emergency Contact #2 (for campers and volunteers):		Relationship to Participant:
<i>Name:</i>	<i>Day Phone: ()</i>	
	<i>Cell Phone: ()</i>	
Name and Address of church registered with for camp:	Camp Dates:	Does the Camper/Volunteer attend the church hosting camp? Circle one:
		YES NO

Participant Agreement, Release, and Acknowledgement of Risk

In consideration of the services of SportsLife Camps, YouthWorks!, Inc., its employees, agents, participants, volunteers and all other persons of entities acting on their behalf (collectively, "SportsLife"), the undersigned participant and, if participant is under eighteen, his/her parent or legal guardian (collectively, "Participant") agrees to release, indemnify, and discharge SportsLife as follows:

1. Participant understands that participation in the activities conducted by SportsLife Camps entails unanticipated risks which could result in injury to Participant, to Participant's property and to third parties, and Participant expressly accepts and assumes all such risks related to such activities. Participant's attendance at SportsLife Camps is voluntary, and Participant has elected to attend the camp in spite of the risks.
2. During the week of camp, participants may be photographed or video taped for promotional materials.
3. Participant hereby voluntarily releases, forever discharges, and agrees to indemnify and hold harmless SportsLife Camps and YouthWorks!, Inc. from any and all claims, demands, or causes of action which are in any way connected with participation in the SportsLife camp, including the use of SportsLife equipment or facilities. Should SportsLife Camps be required to incur attorney's fees and costs to enforce this agreement, Participant agrees to indemnify SportsLife Camps and YouthWorks!, Inc. for such fees and costs.
4. Participant has adequate insurance to cover any injury or damage suffered while participating in the SportsLife Camp, or else agrees to bear the costs of such injury or damage personally. Participant has no medical or physical condition which could interfere with Participant's safety while engaged in activities at the SportsLife camp, or else is willing to assume and bear all costs of any risks, direct or indirect, created by such condition.
5. In the event that Participant files a lawsuit against SportsLife Camps and YouthWorks!, Inc., Participant shall do so solely in the state of the host camp and agrees that the substantive law of such state shall apply in such action. Participant agrees that if any portion of this Agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.
6. Participant hereby authorizes SportsLife Camps to provide emergency medical response and/or treatment as needed for any accident, injury, or illness that may occur while Participant is involved in camp activities. Participant hereby releases and discharges SportsLife Camps and YouthWorks!, Inc. from any and all liability arising out of such treatment.
7. Participant has been informed of the rules and policies in force at the SportsLife camp and agrees to abide by such rules. Participant understands and agrees that if Participant does not abide by such rules and policies, Participant may be required to leave camp.

Signature(s)

By signing this document, Participant acknowledges that if Participant is injured or property is damaged during participation in the activities at SportsLife Camps, Participant may be found by a court of law to have waived his/her right to maintain a lawsuit against SportsLife and YouthWorks on the basis of any claim described in this release.

Adult Volunteer or Camper/Youth Volunteer Parent/Legal Guardian **Name:** *(Please print clearly)*

Adult Volunteer or Camper/Youth Volunteer Parent/Legal Guardian **Signature:**

Date:

Health Conditions

Please list any/all allergies, medications, physical handicaps or restrictions that the SportsLife Camps staff should be aware of:

Date of last Tetanus shot: _____

Insurance Information

Insurance Information

Name of Policy Holder _____

Policy Holder's Phone Number _____

Name of Health Insurance Company _____

Health Insurance Group/Policy Number _____

Phone Number of Health Insurance Company _____

SportsLife Camps Contact Information



Address

SportsLife Camps
3530 E. 28th St.
Minneapolis, MN 55406

Phone Numbers

(612) 722.3023 Office
(877) 601.122 Toll Free
(612) 729.4113 Fax