

SnowCross Camp 2018
February 20-21 / 10a.m. - 3p.m.
Registration Form

Parent Completing / Sending Registration for Student(s)

Parent Home Address City State Zip

Emergency Contact Name(s) & Phone Number(s)

Special Considerations

Student(s) Attending SnowCross:

Name	Any Known Allergy	Grade/Age

I, the undersigned, do hereby release and agree to hold harmless, any and all sponsors, volunteers, other attendees, and counselors of SnowCross camp from any and all liability, claims or demands for accidental personal injury, sickness or death, as well as property damage and expenses, of any nature, which may be incurred by the above-named attendees at SnowCross camp.

Note: Photographs of this event may inadvertently include your student. By signing this registration form, you are also granting permission to the camp for taking said pictures in full accordance with civil law.

Parent Signature

Date