## VIRGINIA WESLEYAN SOFTBALL

## **2022** Fall Boot Camp Registration

NAME:	AGE	Ξ:	TRAVEL OR	GANIZA	10ITA	<b>1</b> :	
GRAD YEAR:		SITION:					
PARENT/ GUARDIAN	l		E-ma	ail			
Cell Phone	Home Pho	one		Work Phone			
ADDRESS:		CITY:		STATE:	Z	IP:	
Camper's Health Insu	rance Co		Po	olicy#_			
Release of Liability For Marlin I do hereby acknowledge that my and entirely voluntary and that the ailments, infirmities and/or disability potential risks from injury, and I a injuries my daughter may incur we Parent/Guardian Signature Photo Release For Marlin Softl By signing above, I grant permisto produce photographs and vide for any lawful purpose including medium. I hereby release Marlin said images or video. Furthermo an interview or evaluation with orgeographic area. I waive my right these materials.  Parent/Guardian Signature Please CHECK the care	y child's participation in a e Camp, University and lities which my child ma agree to accept those ris while attending the camp es:    Description	cademy, its self, and me llustration, at legal repruse the stale purpose cmy family's	ans shall not in any as the result of suse the camp and its agents, and its embers of my family advertising, trade, consentatives from lietements of my child advertising and prights to any and a	y way be reach participate employees the y while at an ability for and, myself, or unblicity with all compensations.	irrevoca irrevoca ny Marlin archive i y violatic my fam out restr	e or liable for a nderstand the y and all actio able and unres s Softball Acad n any manner on or claims re ily members g riction to time	any injuries nature of ins for any stricted righ demy event or in any elating to jiven during limit or
	Defensive I						
MAKE CHECKS PAYABLI	E TO:	VIRG	INIA WESLEY	AN (put	Boot C	Camp in m	emo)
MAIL CHECKS & REGISTRATION TO:		VIRGINIA WESLEYAN SOFTBALL ATTENTION: BRANDON ELLIOTT 5817 Wesleyan Drive Virginia Boach, VA 22455					