

St. Paul Packer Spring Break Sports Camp

March 15-19, 2010

8:00am - 5:00pm

Registration Form

Child Name: _____ M F

Grade _____ Age _____ School: _____

Address: _____

City: _____ State: _____ Zip: _____

Email(for Confirmation purposes): _____

Parent(s) Name: _____

Home Phone: _____ Work Phone: _____

Amount Paid _____ Check # _____ Date _____

PLAYER PERMISSION TO PARTICIPATE/CONSENT FOR MEDICAL TREATMENT

I the parent/guardian of the registrant, a minor, agree that the registrant and I will abide by the rules of any and all of the St. Paul Packer Sports Camps, St. Paul the Apostle School, St. Paul the Apostle Church, and its counselors in charge. Recognizing the possibility of physical injury associated with the Sports Camps, I hereby release, discharge and/or otherwise indemnify any of the St. Paul Packer Sports Camps, St. Paul the Apostle School, St. Paul the Apostle Church, their employees and associated personnel including the registrant as a result of the registrant's participation in the camp.

As the parent or legal guardian of the above-named player, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well being of my dependent.

Name: _____

Parent/Legal Guardian (please print)

Signature: X _____ Date: _____

For more information and registration forms visit our website at:

www.saintpaulschool.org or call 972-235-3263

St. Paul Packers Spring Break Sports Camp

March 15-19, 2010

5th - 8th Grade Boys & Girls

8:00am - 5:00pm



**Football, Basketball,
Volleyball, Baseball,
Ultimate Frisbee, Kickball,
Jazzercise, Kickboxing, Kung Fu
Board Games, Arts & Crafts**

Lunch and Snack Provided Daily

Cost: \$300.00

Director: Rafael Arredondo

972-235-3263

(See reverse side for registration information)