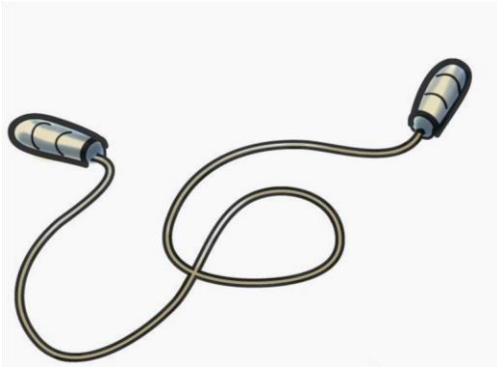


Jump Rope Camp (1/2 Day)

August 8-12th, 2016 -- 9am-12pm

Hosted by Hot Dog USA

Are you interested in learning how to jump rope, or improving your current jump rope skills? Come join us for a fun and exciting ½ day, week-long camp. Jump Rope staff will include members of the Hot Dog USA jump rope team and other National and World Champion jump ropers from around the United States.



Monday thru Friday

9am – 12pm

(Lunch from 12-1pm, optional) – Not included in cost

Additional cost \$15 for lunch due with registration.

Ages: 5+

Camp Held at: Location TBD

Child's First Name: _____ Last Name: _____

Child's DOB: ____ / ____ / ____ Age: ____ T-Shirt Size: ____ (included in cost of camp)

Additional T-Shirts may be purchased for \$15 each. Size: ____ QTY: ____

Address: _____ City/State/Zip: _____

Allergies / Medical Conditions:

Parent Name: _____ Phone: _____

Parent E-mail: _____

Emergency Contact (Name and Ph. #) – can be reached during camp.

Is your child part of a Jump Rope Team? _____ If
yes, which Team? _____ **Hot Dog USA**

E-mail, Mail or Fax Registration Forms by 7/22/16:

Checks Payable to: **Evergreen Athletics LLC**

Attn: Rochelle Cecil – Jump Rope Camp
15000 Woodinville-Redmond Rd NE, Suite 200
Woodinville, WA 98072

Cost: \$275/child

Extra t-shirts \$15 each

Early Bird Discount: \$15 off if paid in full by May 15th

(Payment due with registration forms)

Phone: 425-486-7429 Fax: 425-486-7629

E-mail: Rochelle@techgymnastics.com

Sibling Discount: 10% off second registration
(Discount applied to least expensive camp).

We accept cash, checks (Payable to: Evergreen Athletics LLC), or VISA/MC/AMEX/Discover.)

Child's First Name: _____ Last Name: _____

General Waiver and Release

General: This is signed in consideration of allowing the above named student to enroll in a gymnastics/jump rope program and for appropriate use of the premises of Tech Gymnastics. The undersigned, being the legal and acting guardians of the student, acting for themselves and on behalf of the student release and hold harmless Tech Gymnastics/Evergreen Athletics, Hot Dog USA, as well as its owners, officers, and employees of and from any and all liability, claims, actions, and causes of actions whatsoever, arising out of or relating to any loss, damage, or injury, that may be sustained by the student while in, on, or upon the premises for Tech Gymnastics, Hot Dog USA Jump Rope Facility, or other spaces/facilities used/rented for said event, Jump Rope / Gymnastics Camp, August 8-12th, 2016.

Medical Attention: The undersigned, being duly aware of the risks and hazards inherent upon participation in the classes, activities, and events being conducted by Tech Gymnastics and Hot Dog USA, acting for themselves and the student, hereby elect voluntarily to enter upon the said premises under the control of said corporation, knowing the present condition. The undersigned, acting for themselves and the student, hereby voluntarily assume all risks of loss, damage, or injury that may be sustained by the student while in said premises described above. In the event of any incident which may require immediate medical/dental or any other emergency attention/care in which the Legal Guardians cannot be notified in a reasonable time through reasonable means, the undersigned hereby authorizes Tech Gymnastics to take all necessary actions as it relates to immediate medical/training attention, transportation, and emergency medical services as warranted in the course of care of the undersigned student. The undersigned is aware that they will be responsible for all fees and expense as they may relate to this medical attention paragraph.

Waiver and Release: I, _____ (**parent name**), am fully aware of and appreciate the risks, including the risk of catastrophic injury, paralysis, and even death, as well as other damages and losses associated with participation in a gymnastics program. I further agree that Tech Gymnastics along with its employees, agents, officers, and directors, shall not be liable for any losses, expenses, or damages occurring as a result of participation in the program and/or activities. Or event except where such loss or damage is the result or the intentional or reckless conduct of one of the groups or individuals identified above.

Acknowledgment: This release shall be binding upon distributes, heirs, next of kin, executors, and administrators of the student and the undersigned.

In signing this release, the undersigned hereby acknowledges:

- a. That he or she has read this release, understands it, and signs it voluntarily
- b. That the undersigned signing as legal guardian is truly a legal guardian.

Date: ___/___/___

Parent Signature: _____