Application for Enrollment

(Please print)

Camper's Name		
Address		
CityStateZip		
Home Phone		
Email		
Age Grade		
Allergies		
Present medications		
Past illness or other information that would be useful in the event of treatment if necessary:		
J <u>r. Jays Session 1: Ages 5-11</u> May 24-26 Commuter Only \$165		
Jr. Jays Session 2: Ages 5-11		
June 9-11 Commuter Only \$165		
Jr. Jays Session 3: Ages 5-11 June 25- June 27 Commuter Only \$165		
Jr. Jays Session 4: Ages 5-11 July 28- July 30 Commuter Only \$165		
T-Shirt Size <u>Ball (size 4)</u> \$20		
□ YS □ YL □ Yes □ YM □ YXL		
*T-shirt included in price		
Please send all applications with payment and your camp registration form to:		

Johnny Torres/Creighton Soccer Academy

Waiver and Consent Form

(Please print)

IN CASE OF AN EMERGENCY:

Parent/Guardian	
Home Phone	
Work Phone	
Parent/Guardian	_
Cell Phone —	

Insurance Company Policy Holder

- I, the undersigned, hereby certify that I am the parent or legal guardian of (name of camper). I hereby give per-mission for the Camp staff to seek during the period of the Camp, appropriate medical attention for my child, for the medical attention to be given to my child, and for my child to receive the medical attention in the event of accident, injury or illness. I will be responsible for any and all costs of medical attention and treatment.
- I, the undersigned, understand that Creighton Soccer Academy is an active, physical sport and that injuries can often occur during participation at Camp. I also understand that there will be more campers than staff at the Camp, and that my child cannot receive individualized attention and individualized supervision at all times. I hereby acknowledge that my child is physically fit and mentally capable of participating in practices, games, and all camp activities.
- I, the undersigned, hereby acknowledge and understand that the Creighton Soccer Academy is a privately run sports camp and is not operated by or through Creighton University. The Camp is neither

Sponsored, controlled, nor supervised by Creighton University; it is operated through Johnny Torres S-Corp. I waive, release, and forever discharge Johnny Torres S-Corp., and Creighton University and the aforementioned staffs, officers, agents, employees, representatives, successors, and assigns from any and all liability claims, demands, actions, and cause of action whatsoever arising out of or related to any loss, personal injury, or property damage that may be sustained or occur during the participation in camp activities or while at camp.

I, the undersigned, acknowledge that during my child's participation in camp he may be photographed, or video recorded and give permission for these images to be used in promotional materials for the camp, including but not limited to printed and electronic publications, website and official camp or Creighton University

Athletic Department social media.

My signature below indicates that I have provided true information and 2500 California Plaza, Omaha, NE 68178

Register Quickly, space is limited!

have read, understand and agree to all statements on this entire form and on any other form required by the Camp.			
Signature			
This form must be completed in full prior to registration to allow camp participation.			