

****OCHS Acettes Dance Camp 2015****

\$25 per camper if pre-registered by Thursday September 10th.
\$30 per camper the day of camp.

Camp: Saturday September 19, 2015 at OCHS Large Gym----9:00am – 12:00pm

Performance: Friday September 25, 2015 at Steele Stadium---7:00pm

Camper's Name: _____

Phone: _____

Address: _____

Grade: _____ Age: _____

School: _____

T-Shirt Size (Circle One):

Youth: S M L

Adult: S M L

Individuals authorized to pick up above named camper:

For pre-registration, please mail registration form, medical & liability release form, and check to:

Owensboro Catholic High School Acettes

1524 W. Parish Ave.

Owensboro, KY 42301

Make checks payable to OCHS Acettes

Owensboro Catholic Acettes Dance Camp

Medical Release Form

Name of Camper: _____

Date of Birth: _____

Please provide the following about the above named camper:

Allergies/Medical Condition: _____

Emergency Contacts & Phone Numbers:

1: _____

2: _____

3: _____

Please check/complete one of the following:

____ I hereby certify the OCHS Acette Dance Camp staff has full and unconditional authority to proceed with diagnosis and treatment as judgment indicates for injuries during camp. OCHS and attending physician(s) shall not be held responsible for any consequences resulting from such injuries.

____ I hereby authorize limited treatment as follows:

I, _____ declare I am the father/mother/guardian (please circle one) of the named minor camper.

Signature