

REGISTRATION FORM - SUMMER 2020- Frozen Jr.

NAME	BIRTHDATE	TODAY'S DATE
ADDRESS		
HOME#: CELL#:	EMAIL	······································
SCHOOL	GRADE (entering fa	II 2020)
T-SHIRT SIZE		
PARENT NAME (1st Contact)	CELL	WORK PHONE
PARENT NAME (2nd Contact)	CELL	/WORK PHONE
PARENT'S EMAIL		
TELL US ABOUT YOURSELF 3 THINGS THAT MAKE YOU HAP		
1 2		
3		
WHAT IS YOUR FAVORITE SONG	G TO DANCE TO?	
WHAT SPECIAL THING DO YOU 'PARENTS:	WANT PEOPLE TO KNOW	ABOUT YOU?
I CAN CAR POOL KIDS WHO LIVE	E NEAR ME TO CA	AMP FROM CAMP

Waiver and Release of Liabilit	CY
l,	, understand and hereby acknowledge that participation in
the Jr. Woodland	
and assume all such RISKS ANI all liability including, but not li to save and hold harmless Jr. \	ram involves INHERENT RISKS AND HAZARDS. I VOLUNTARILY accept D HAZARDS and do hereby release Jr. Woodland Players from any and mited to bodily injury, personal injury, and/or property damage and Woodland Players, its agents and employees from any and all claims, of whatsoever kind or nature resulting from my child's VOLUNTARY
behalf of my child as deemed safely by the staff members. Ir	the above program to contact the medical personnel listed below on necessary the event of any medical situation that cannot be handled a case of an emergency, my child may be transported to Pikes Peak or Pikes Peak Regional Hospital.
Doctor:	Phone :
Parent/Guardian Name(s)	
Cell Phone:	
	ons/medication needs that staff should be aware of:
In the event I cannot be reach	ed, please contact the person(s) listed below:
Name:	Phone:
Name:	Phone:
Dat-	
ed:Sign	ned:
RELEASE FORM	
•	ke or walk to camp each day. I release Jr. Woodland Players of all re- nto camp and after they sign out of camp each day.
PARENT SIGNATURE	DATE