

GENERAL APPLICATION
FOR ST. ANNE'S SUMMER PROGRAMS

NOTE: Please use specific applications (also found in this booklet) for Major League and Rookie Division Sports Camps.

Child's Name _____

Entering grade _____ this fall. DOB: _____ M ____ F ____

Parents(s)/Guardian(s) full name _____

Home address _____

City _____ Zip _____ Home # _____

Mother's wk. # _____ Father's wk. # _____

Programs applied for: (1) _____ Cost: _____

(2) _____ Cost: _____

I have enclosed a check for \$ _____ made payable to St. Anne's.

Doctor's name _____

Doctor's address _____

In case of an emergency, please contact:

Name _____ Phone _____

Name _____ Phone _____

In case of an emergency, I hereby give permission to St. Anne's Episcopal School and/or Summer Program staff to obtain medical attention for my child (child's name): _____, and I will be responsible for any expenses incurred. I also give permission for my child to go on any field trip supervised by a staff member of St. Anne's Summer Programs.

WARNING: Before attending St. Anne's Summer Programs, a physical exam given by a licensed medical physician is highly recommended. Participation in camp activities is generally not hazardous. HOWEVER, PARTICIPATION IN THESE ACTIVITIES INCLUDES AT LEAST A RISK WHICH MAY RANGE IN SEVERITY FROM MINOR TO LONG-TERM CATASTROPHIC. Although serious injuries are not common, it is impossible to eliminate the risk. Participants can and do have the responsibility to help reduce chances of injury. Players must obey all safety rules, report all physical problems to their counselors, take medication as prescribed, and inspect their own equipment daily. By signing this permission form, I acknowledge that I/we have read and understood the above warning. I/we acknowledge that I/we do not know of any medical condition that would prevent or limit the participation of this applicant in athletics or outdoor programs. I/we, on our own behalf and that of the applicant, hereby release St. Anne's Episcopal School, its employees, agents and representatives from any financial responsibility or liability arising from injury to this applicant in connection with his/her participation in the summer programs, including injury from negligence (other than gross negligence) of employees, agents, or other representatives of St. Anne's Episcopal School.

Signature of Parent/Guardian

Date