

2015 LCCC Golden Eagles

Winter Soccer Academy

Liability Release

In consideration of the Laramie County Community College Soccer Camp granting the child(ren) permission to participate in the LCCC Soccer Camps, I hereby assume all risks of personal injury that may result from Soccer Camp activity. As parent/guardian, I hereby release Laramie County Community College, the LCCC Soccer Camp, the LCCC board of trustees and their members, officers, employees, and agents, all instructors and participants, in said Soccer Camp program from all liability, including claims and suits at law or in equity, for injury which may result from the child(ren) taking part in Soccer Camp activities.

Parent/Legal Guardian Signature

Medical Authorization

I hereby authorize and give my consent to the health authorities of Laramie County Community College and Laramie County Community College Soccer or any licensed physician or athletic trainer to perform upon or administer any reasonable, necessary medical treatment to:

Name(s) of Child(ren)

I agree to assume all costs related to such treatment. I understand that I will be responsible for any medical or other charges in connection with the student's attendance at this camp.

Name of Insurance Company

Policy Number

Parent/Legal Guardian Signature

Date

- Photos may be taken of your child to be used for promotional materials. If you do NOT want photos taken of your child, please check here.

Disclaimer

Laramie County Community College does not discriminate on the basis of race, age, color, religion, national origin, gender, in its programs or activities. Full participation of all individuals is encouraged.

Registration Form

Please note: Payment due upon registration.

Name(s) of Child(ren) attending camp

Name of parent or guardian

Address

City/State/Zip

Phone

E-mail

T-shirt size

Age

Cost

Golden Eagles Winter Soccer Academy

\$95 per child and \$70 for each additional family member(s)
Number attending: _____

Make checks payable to

Laramie County Community College Men's Soccer
Amount of enclosed check: \$ _____

Mail payment and registration form to

Laramie County Community College
Attn: Vince Gibson
Soccer Office, PE Building, Room 129
1400 E. College Drive
Cheyenne, WY 82007