## BROWNLEE – FOREST CITY VOLLEYBALL CLUB CAMP REGISTRATION FORM - 2019

Name			School & Grad	ae (Sept 2	2019)	
Birthdate	itial last	A	Age at Camp	_	Sex	
Day/month/year Address			City	Postal Code		
Home Phone			_ E-mail			
I wish to register	for the foll	owing	sessions			
Circle week(s) desired			July 29-Aug 1/19		August 12-15/19	
T-Shirts (Adult S Circle One	Sizes)	S	M	L	XL	
Father's NameEmployer		_ Employer	Work Phone Cell Phone			
Mother's Name_			Employer		ork Phone	
			Register for both ses			
Health Card Number				(Mandatory) aware of (if any)		
•	-	-	ate in the Brownlee Soall Camp permission		• -	
agree, both personal Saunders Secondary The Brownlee Sumall claims, actions, of	acceptance of a lly and on behay School, the T mer Volleyball costs, expenses	my child alf of my hames V Camp, s, and de	being permitted to take porchild or charge, to save he valley District School Boaits instructors, organizers, mands. It is understood an executors, and assigns. The	armless and rd, The For officials, and ad agreed th	I keep indemnified est City Volleyball Club, nd agents from and agains at this release is binding o	
Parent Signature			Da			
The mailbox at 8	371 Viscoun	t Road	eted registration form, London, Ontario N6J telephone or fax	2C7	nent to STER EARLY!	