

Oklahoma Homeschool Volleyball Summer Camp Registration Form

Player Information

Name: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Birth Date: \_\_\_\_\_

T-shirt size (adult sizes) circle one: small medium large x-large xx-large

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Parent Information

Father's name: \_\_\_\_\_

Work phone : \_\_\_\_\_ cell phone: \_\_\_\_\_

Mother's name: \_\_\_\_\_

Work phone: \_\_\_\_\_ cell phone: \_\_\_\_\_

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Medical Information

If parents are not present or cannot be contacted—Notify in an emergency:

Name: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone/other \_\_\_\_\_

Relationship : \_\_\_\_\_

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I, the parent or the legal guardian of the registrant, a minor, agrees that the registrant and I will abide by the rules of the Oklahoma Homeschool Volleyball League. I also recognize the possibility of physical injury associated with participation in sports and in consideration for the Oklahoma Homeschool Volleyball League, accepting the registrant for it's sports programs and associated activities, I hereby release, discharge and/or otherwise indemnify the Oklahoma Homeschool Volleyball League, Lana Horner, and the Optimist Club, their members, officers, and directors against any claim by or on behalf of the registrant as a result of the registrant's participation in the program.

Name: \_\_\_\_\_

Parent/Legal Guardian (please print)

Signature: X \_\_\_\_\_