



Little Wildcats Soccer Camp



Date: Monday, June 19 – Thursday, June 22nd

Time: 8 am – 2pm

Fee: \$100 (includes soccer camp, t-shirt, and extra refreshments each day, and lunch provided on the last day)

Make checks payable to Destrehan Boys and Girls Soccer.

Please fill out the form below and return it along with a check for \$100 by Friday, June 16th, 2022

Please put it in an envelope and address it to:

DHS Boys and Girls Soccer Camp

Attn: Jade Gallaher

1 Wildcat Lane, Destrehan, LA 70047.

Registration will be accepted the day of camp, but T-shirts may be limited because late sign up.

For more information, email: Jade Gallaher at Jgallaher@stcharles.k12.la.us

Or David Mitchell at Dmitchell2@stcharles.k12.la.us

Parental Release and Indemnity Agreement

I hereby request that you accept the enrollment of _____ in the Destrehan High School Little Wildcats Soccer Camp on June 19th -22nd, 2023. In consideration of this application, I hereby release Destrehan High School and its employees from all claims on injuries or Covid related illnesses, which may be sustained by my child while attending the Destrehan High School soccer camp. I agree to indemnify Destrehan High School and its employees for any claim, which may hereafter be presented by my child as a result of such injuries or symptoms after the fact.

In the event that I am unavailable for purposes of providing parental consent, I authorize the staff, hospital, or emergency care center affiliated with Destrehan High School to provide such hospital care that includes routine diagnostic procedures and medical treatment as necessary to my minor child. I understand that consent does not include major surgical procedures and is only valid during the dates of the camp.

Child's Name: _____ **Age** _____ **Gender: M or F**

Parent's Name: _____

Parent email (to receive updates on camp): _____

Daytime Phone # _____

Cell Phone # _____

Persons authorized to pick-up:

List any allergies and/or medical conditions:

Emergency Contact:

Name: _____ **Cell Phone:** _____

Name: _____ **Cell Phone:** _____

Age Group: (Please circle only one)

6-8

9-10

11-12

T-Shirt Size:

Youth Small _____ Youth Medium _____ Youth Large _____ Youth X-Large _____ Adult Small: _____

Referred to camp by: _____

Please Sign & date to verify all information provided is correct.

Parent / Guardian Signature: _____

Date: _____