



Union Soccer Camp Registration Form

Instructions:

Fill out this form (front and back), tear it off, mail it with check payable to :

Cory Butler

12136 E. 31st Pl.

Tulsa, OK, 74146

Amt. Pd. _____ Amt. Due _____

Complete balance due at start of camp.



Union Soccer Camp Waiver/Release

Student's Name _____ Date _____

DOB _____ Age _____ School _____

Address _____

City _____ Zip _____

Home Phone _____

Parent Names _____

Emergency Contact Information

Name _____

Phone _____

Check the appropriate blank and complete information in Item 1, if applicable.

_____ 1. This is to certify that my child is covered by the following accident insurance,

_____ (name of company and type of policy)

And has my permission to participate in all school-sponsored activities. It is agreed that the school will be relieved of all responsibility in the event of an injury.

_____ 2. This is to certify that my child will be covered by a student accident policy.

_____ 3. This is to certify that we have NO INSURANCE policy which will cover my child. However, he has my permission to participate in all school activities. It is further agreed that the school will be relieved of all responsibility in the event of an injury.

Parent Signature _____

Date _____

