



Monte Vista Christian School Summer Sports Camps



Release Form

Submit this form to the MVCS Athletic Department by the first day of camp or the athlete will not be able to participate.

Athlete information

Athlete Name: _____ Gender: _____ DOB: _____
Address: _____ City: _____ Zip: _____
Current school: _____ Address: _____ Phone: _____

Parent/Guardian Information

Custodial Parent(s): _____
Daytime Phone: _____ Evening Phone: _____ Cell: _____
Daytime Phone: _____ Evening Phone: _____ Cell: _____
Additional Caregiver: _____ Relationship to Child: _____
Daytime Phone: _____ Evening Phone: _____ Cell: _____

Pickup Information

List additional people authorized to pick up the athlete at dismissal time:

Name: _____ Phone: _____
Name: _____ Phone: _____

Emergency Medical Information

List emergency contacts other than the custodial Parent(s):

Contact Name: _____ Phone: _____ Relationship to Child: _____
Contact Name: _____ Phone: _____ Relationship to Child: _____
Athlete's Physician _____ Address: _____ Phone: _____
Medical Insurance Carrier: _____ Policy Number: _____

List any conditions/concerns such as allergies, medical issues, behavioral or physical conditions, or any special needs the Summer Camp staff needs to be aware of (attach additional sheets if necessary): _____

Agreement

Custodial Parent/Guardian must sign below to agree to the following statements:

Medical Release: In the event that the undersigned, or our (my) authorized physician, cannot be reached, and in the judgment of the director or other staff member of the Monte Vista Christian School Summer Camp, there is a necessity for immediate examination and/or treatment of our (my) child (ward), we (I) hereby authorize any of the personnel to obtain for said child such medical service

_____ *Initial here to acknowledge the previous statement*

Hold Harmless: As a condition of my child's (ward's) voluntary participation in the Summer Camp programs, I agree to waive any claim and to hold Monte Vista Christian School harmless for additional injuries to my child (ward), providing Monte Vista Christian School and/or its agents have acted with reasonable care to provide safe conditions and adequate supervision for school sponsored activities.

_____ *Initial here to acknowledge the previous statement*

Media Release: I hereby give permission to Monte Vista Christian School to use my child's (ward's) picture in promotional materials and press releases.

_____ *Initial here to acknowledge the previous statement*

Parent/Guardian - Name and Signature

Date



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Registration Form

Submit this Form to the MVCS Athletic Department

www.MVCS.org/SUMMERCAMPS

Visit this page to see all information and schedules

Parent/ Guardian Information:

Parent/Guardian Name _____

Daytime Phone: _____ Evening Phone: _____ Cell: _____

E-mail Address (please print): _____

Athlete Information

One Form Per Participant

Athlete Name: _____ DOB: _____ Gender _____

Current School: _____ Grade entering in fall: _____

T-Shirt Size Adult sizes only (Circle One): XS S M L XL XXL (only full day camps receive t-shirts)

Summer Sports Camp Choices	Dates	Fees
Total Amount Enclosed:		

Choose 1 Payment Method

- **Check or money order** - Make payable to MVCS
Attach Check to this Form and Mail it or Drop Off in person
- **Credit Card** - Fill out the authorization form below:
Fax form or drop off in person

MVCS Credit Card Authorization Form

Name as it appears on card: _____

Card Number: _____

Credit Card Type: (Circle One) Visa MasterCard

Expiration date: _____ V-Code (3 digit) _____

Total Payment Amount: _____

Signature: _____

How to submit this form

Call 831-722-8178 x148 for more information

Mail Enrollment to:

MVCS Summer Sports
2 School Way
Watsonville, CA 95076
For Check/Money Order Payments

FAX form to 831-722-6003

For Credit Card Payments

Drop form and payment off in person

MVCS Athletic Department
For credit card or check payments

- Enrollment is not guaranteed until payment has been received.
- Summer Sports Camps Release Form is required for participation.
- You will be notified if the requested camp is full.

Thank you!