You must bring these 2 forms with you to check-in

Carthage Summer Camp Housing Registration and Health Form

Camp Name: Carthage Vo	olleyball Camp Date: 7/25 – 7/27		
Last Name:	First Name:		
Home Address:			
City:	State:Zip:		
Phone Number:	D.O.B.:		
Gender: Male F	emale		
Emergency Contact:	Relationship:		
Day Time Phone Number	:		
Evening Phone Number:_			
Cell Number:			
Health Conditions: Asthma Diabetes Epilepsy Other Conditions	Allergies: Insect Stings Foods MedicationsOther Allergies		
	Date:		
Parent/Guardian:	Date		

ASSUMPTION OF RISK AND INSURANCE RELEASE

The undersigned hereby acknowledges that he/she understands all participation in the Carthage Summer Volleyball Camps hosted by Carthage College is voluntary, and is not part of the academic curriculum of the College. In consideration of the college making any equipment and/or facilities available to the summer camp attendees and/or the undersigned while participating in such activities, the undersigned herby releases CARTHAGE COLLEGE, its successors, assigns, officers, agents and all employees from any and all claims, demands and causes of action whatsoever in any way growing out of or resulting from the undersigned individuals participation in the activities of any summer volleyball camp activity.

The undersigned further agrees that he/she understands that many of the Volleyball Camp activities involve substantial risk of injury, and that the college does not provide medical insurance covering such injuries and the undersigned has, accordingly, been encouraged to secure insurance protection.

If the undersigned is a minor, then the signature of the parent/legal guardian appearing below signifies acceptance by parent/legal guardian that the terms and conditions hereof shall be binding.

Please also provide and photo copy of the front and back of your insurance Card

Athlete's Signature	Date	Printed Name
Parent/Guardian Signature	Date	Printed Name
(If athlete is under the age of 18 at a	the time of Camp)	

^{*} In case of emergency the camp staff will use the contact information provided at the time of registration*