

XTREME-HOOPS.COM

Name: _____ Male/Female:_____ Age:_____ Current Grade:_____

Address: _____

Phone(s): _____ DOB: _____

School _____ Email: _____

Insurance Carrier & Number: _____ Emergency Contact Number: _____

APPLICATION

Send checks and this form to: **Xtreme Hoops, 550 Norwyck Drive, King of Prussia, PA 19406**

610-247-4387/ email: Shellym9400@gmail.com

I, _____, being the parent or guardian of _____ ("Camper"), a minor, hereby agree to the following:

- a. Camper is in good health, with no present medical or psychiatric conditions that would prevent attendance and full participation at a Xtreme Hoops, LLC Camp.
- b. Camper has health insurance.
- c. I hereby release and hold Xtreme Hoops, LLC, volunteers, and employees harmless from any and all injuries, accidents, damages or losses that Camper may incur whether from natural or manmade causes, foreseeable or unforeseeable, expected or unexpected.
- d. I am aware that engaging in recreational and sports activities at the camp may be a hazardous activity. Camper is voluntarily participating in this activity with knowledge of the danger involved and I hereby agree to accept and assume any and all risks of injury associated therewith including, but not limited to, property damage, personal injury, bodily injury, or death.
- e. As consideration for being permitted to attend and participate in a Xtreme Hoops, LLC camp, I hereby agree that I, on behalf of myself and Camper, will not make a claim against, sue or attach the property of or make any other demand on Xtreme Hoops, LLC, Upper Merion School District, Upper Merion Park and Recreation, volunteers and employees or any of their affiliated organizations for injury or damage resulting from negligence or gross negligence or other acts, howsoever caused, by any employee, agent, or contractor of Xtreme Hoops, LLC or any of their affiliated organizations as a result of Camper's attendance and participation at a Xtreme Hoops, LLC camp. I hereby release Xtreme Hoops, LLC, its volunteers, and employees and any of their affiliated organizations from all actions, claims, or demands that I now have or may hereafter have for injury or damage resulting from attendance and participation at a Xtreme Hoops, LLC camp.
- f. I agree that Xtreme Hoops, LLC may render immediate emergency medical treatment and/or transport Camper to a medical care facility.
- g. Xtreme Hoops, LLC have my permission for photographs and/or videos to be taken of Camper and Xtreme Hoops, LLC has the right to utilize such materials in brochures and other promotional materials.
- h. I agree that Camper must abide by camp policies and the instructions of the camp staff. I agree that should Camper be dismissed from camp, no part of the tuition shall be refunded.
- i. I agree that no part of my tuition shall be refunded for late arrivals, early departures, vacations, illness or injury.

Signature: _____

Date: _____

Total enclosed: \$_____

Make check/money order payable to Xtreme Hoops