

Summer Sport Camp

Registration Form

Rocky Mountain Fencing Academy

10320 E. Jewell Ave. #61, Denver, CO 80247

ph. 303-918-83-83, e-mail: maciek@rockymountainfencing.com

Camp location: 1832 S. Wahsatch Ave, Colorado Springs, CO 80995

STUDENTS INFORMATION: *(please type or print)*

Fencer's Name: _____

Date of Birth: _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail(s): _____

e-mail address where you would like announcements and updates send (please print very clearly)

Parents or Guardian Name(s): _____

for fencers under age of 18

Health condition, Allergies: _____

EMERGENCY CONTACT INFORMATION:

Emergency Contact Name: _____

Relationship to Fencer: _____

Phone Number: _____ Alternate Phone: _____

WAIVER MUST BE SIGNED!

WAIVER:

I, *(insert fencers name here)* _____

recognize that sport of fencing has inherent dangers, including paralysis and death and choose to participate in this sport and use this facility at my own risk and release Rocky Mountain Fencing Academy, its owner, coaches, instructors and sponsors from any liability. I also recognize and understand that in the event of an injury occurring that I entered the premises accepting that possibility. Neither shall I hold the others fencers liable for the routine risk of fencing.

Signature of Fencer: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____

of fencer under age of 18