



SPRING ACTION
TRAMPOLINE

**Advanced/Freestyle Camps
Registration Form
Summer Camp 2017**

Name: _____

Address: _____

City: _____ Postal Code: _____

Phone: _____ Birth date (D/M/Y): _____

E-mail Address: _____

Parents Name: _____

Emergency Contact Phone: (H) _____ (W) _____

Allergies or medical concerns? _____

Please Check the camp(s) you will be attending and circle the program you would like:

Sign up for:	Dates	3 Day Camp Full day	3 Day Camp Half Day
<input type="checkbox"/> Camp 1	July 24-26 th	9:00am-4:00pm \$160	9-11:30am or 1:30-4pm \$95
<input type="checkbox"/> Camp 2	July 31 st -Aug 2 nd	9:00am-4:00pm \$160	9-11:30am or 1:30-4pm \$95
<input type="checkbox"/> Camp 3	Aug 21-23 rd	9:00am-4:00pm \$160	9-11:30am or 1:30-4pm \$95

Notice Of Warning:

There is a potential risk of injury involved in training and participating in any sport. Spring Action has made every effort to create a safe and controlled environment for participation. Rules, that must be followed, have also been established for participation and conduct on and about the training area.

Signature of Parent or Guardian

Date