



PARENTAL CONSENT FORM

This completed form will enable camp medical staff and health facilities in Lynchburg to provide prompt care to your minor son or daughter. All areas of this form must be completed prior to camp registration.

I, the undersigned, hereby certify that I am the parent or legal guardian of the camper. I hereby give permission for the staff of the camp to seek, during the period of the camp, appropriate medical attention for the camper. I give permission for medical attention to be given and for the camper to receive medical attention in the event of accident, injury, or illness. I will be responsible for all costs of medical attention and treatment.

I, the undersigned, as guardian of _____, understand that wrestling is an active, physical sport and that injuries can take place during training. I hereby affirm that my child is physically and mentally capable of participating in wrestling and camp activities.

I have sought the opinion of my child's pediatrician, _____ and he/she believes that _____ is fully capable of safely engaging in these activities. I also understand that it is my responsibility to care for the camper listed above, and I agree that he/she is fully capable of engaging in this type of activity.

I, the undersigned, for myself, my heirs, executors, and administrators, waive, release, and forever discharge Liberty Flames Wrestling Camp and its staff, officers, agents, employees, representatives, successors, and assigns from all rights and claims for damages, injury, or loss to person or property that may be sustained or occur during participation in camp activities or while at camp, whether or not damage, injury, or loss is due to negligence.

Signature of parent or guardian: _____

Date: _____

Printed name of parent or guardian: _____

Date: _____

CAMP APPLICATION

Please complete both sides of this form and return it with a \$100 nonrefundable deposit
(made payable to Liberty Wrestling) to:

Liberty Wrestling
1971 University Blvd.
Lynchburg, VA 24515

Camp participation is only limited by age and space available. Receipts are available at registration upon request.

Middle and High School camp fees cover three days of training, a T-shirt, awards, and entry into the camp tournament.

Overnight camper registration deadline: **July 18**

SESSION	COST	TOTAL
<input type="checkbox"/> Elementary/Middle/High School Commuters	\$250	
<input type="checkbox"/> Middle/High School Overnight Campers (meals included)	\$375	
<input type="checkbox"/> Elementary School Meal Plan	\$40	
<input type="checkbox"/> Middle/High School Meal Plan (Commuter) required	\$50	
<input type="checkbox"/> Early Registration Discount (by May 31)	-\$10	
<input type="checkbox"/> Team Discount (10 students or more)	-\$20	
<input type="checkbox"/> Sibling Discount (second child)	-\$20	
<input type="checkbox"/> Sibling Discount (third child)	-\$40	
TOTAL AMOUNT DUE	\$	
TOTAL ENCLOSED (MINIMUM \$100 DEPOSIT PER CHILD*)	\$	
REMAINING BALANCE DUE	\$	

*\$100 deposit required if not paying in full.

Discounts can be combined.

(Coaches may be eligible to earn a stipend and attend for free when bringing a certain number of campers. Please contact Coach Castro for more information.)

Please print in blue or black ink.

Name:

Address:

City: State: ZIP code:

Name of parent or guardian:

Email:

Home phone: Work phone:

Camper's school:

Male Female Age: Grade: Weight:

T-shirt size: Adult Youth S M L XL XXL