

**CONTACT INFORMATION, INDEMNITY & CONSENT FORM**  
[www.totalsportcamp.com](http://www.totalsportcamp.com)

Name of Child: \_\_\_\_\_ Birth Date: \_\_\_/\_\_\_/\_\_\_ Age/Grade: \_\_\_\_\_

Name of Parent(s) / Guardian: \_\_\_\_\_

Street Address: \_\_\_\_\_

City and Zip Code: \_\_\_\_\_

Mom- Cell Phone: (        ) \_\_\_\_\_ Home: (        ) \_\_\_\_\_

Dad- Cell Phone: (        ) \_\_\_\_\_ Home: (        ) \_\_\_\_\_

Other- Phone: (        ) \_\_\_\_\_

**EMAIL Address:** \_\_\_\_\_

Emergency Contact/Relationship: \_\_\_\_\_ / \_\_\_\_\_

PHONE (        ) \_\_\_\_\_

Family Physician: \_\_\_\_\_ Phone: (        ) \_\_\_\_\_

Date of Last Tetanus Booster: \_\_\_/\_\_\_/\_\_\_ Any Allergies to Drugs or Food? (circle): None / Yes:

If yes, please explain: \_\_\_\_\_

Other Pertinent Information: \_\_\_\_\_

Health Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

**INDEMNITY AND HOLD HARMLESS AGREEMENT**

I/we hereby grant permission for my child to participate in the recreation program for which I am registering. I agree to indemnify and hold harmless the Los Alamitos Unified School District, City of Seal Beach, Rossmoor Community Services District, Westerly School of Long Beach, Scott Durzo's Total Sport Camp, and any other entity associated with the program, their officers, agents and sub-contractors from any liability, claim or action arising out of such participation. I understand that this program is not bound by the responsibilities and legalities that accompany a licensed daycare program. I further certify that my child is in good health and has no physical or other impediment, which would endanger him/her, or any other participant in taking part in such an activity.

**CONSENT TO TREAT A MINOR**

I certify that I am the parent or legal guardian of the child being enrolled in this program. I hereby authorize and consent to any x-ray examination, anesthetic, medical or surgical diagnosis rendered under the general or special supervision of any member of the medical staff and emergency room staff licensed under the provisions of the Medicine Practice Act or Dentist licensed under the provisions of the Dental Practice Act and on the staff of any acute general hospital holding a current license to operate a hospital from the State of California Department of Public Health. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care required but is given to provide authority and power to tender care which the aforementioned physician in the exercise of his/her best judgment may deem advisable. It is understood that effort will be made to contact the undersigned prior to rendering treatment to the patient, but that any of the above treatment will not be withheld if the undersigned cannot be reached. This authorization is given pursuant to the provisions of section 25.8 of the Civil Code, State of California.

Restrictions, if any: \_\_\_\_\_

This consent will remain in effect until rescinded in writing.

**CONSENT FOR FIRST-AID TREATMENT:** I hereby authorize the staff of Scott Durzo's Total Sport Camp to provide immediate first aid to my child in the event of illness or injury.

**CONSENT FOR TRANSPORTATION:** If this program provides for the transportation of my child, I hereby grant permission to the program to provide such transportation.

**PHOTOGRAPHIC RELEASE:** I hereby give Scott Durzo's Total Sport Camp, it's successors and assigns, the absolute and irrevocable right and permission with respect to photographs being taken of my child: (a) to use, reuse, publish and republish in whole or in part and (b) to use my child's name. I further release Scott Durzo's Total Sport Camp from any claims and demands arising out of the use of same.

I have read, understand and agree to all the terms as set forth above.

Signature: X \_\_\_\_\_ Date: X \_\_\_\_\_

Parent or Legal Guardian

## SCOTT DURZO'S TOTAL SPORT CAMP - REGISTRATION FORM

P.O. Box 871, Seal Beach, California, 90740

[www.totalsportcamp.com](http://www.totalsportcamp.com)

**Camp Selections** (\$125 per week or the Famous Kid Card)

Camper's First Name	Last Name	Age	extended care?	Please tell us the first day your child will participate:
<b>Sport Camp Kid Card(s)</b>	15 days = \$360 30 days = \$700			

TOTAL \_\_\_\_\_

### RELEASE OF ALL CLAIMS AND LIABILITY

In consideration of the acceptance of my application for entry in the recreational event described on this application form, I hereby waive, release and discharge any and all claims for damages, for death, for personal injury or property damage which I may have or which may hereinafter incur to me, my heirs, or my beneficiaries, as a result of my participation in said recreational event. This release is intended to discharge, in advance, promoters, sponsors, officials and any and all involved municipalities and/or municipality employees or other public entities and their employees (and their respective agents and employees), Scott Durzo's Total Sport Camp, from and against any and all liability arising out of or connected in any way with my participation in said recreational event, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above.

I further understand that serious accidents occasionally occur during the recreational event in which I am going to participate in and that participants in this recreational event occasionally sustain mortal or serious personal injury, and/or property damage, as a consequence thereof. Knowing the risks of the recreational event that I am enrolling in, nevertheless, I hereby agree to assume those risks and to release and hold harmless all of the persons or entities mentioned above who (through negligence or carelessness), might otherwise be liable to me (or my heirs, beneficiaries or assigns) for damages.

It is further understood and agreed that this waiver, release and assumption of risk, is to be binding on my heirs, beneficiaries and assigns. I agree to accept and abide by the rules and regulations which control and are in effect for participation in the recreational event in which I am enrolling.

Further, the property on which this recreational event is to be conducted may not be in a safe condition. It is understood and agreed that by engaging and participating in the recreational event, I am hereby waiving any and all right to claim any damages or injuries which may occur to me as a result of the unsafe condition of that property.

I further understand and acknowledge that I am fully and willingly giving up any claim against or right to sue, the City of Seal Beach, the Los Alamitos Unified School District, Scott Durzo's Total Sport Camp, Westerly School of Long Beach, or their employees, agents or assignees for any injury that I may suffer, even if the injury was caused in whole or in part by the negligence of the City, the School District or its employees, Scott Durzo's Total Sport Camp, Westerly School of Long Beach or its agents or representatives or by the dangerous conditions of any property on which the recreational activity is being conducted.

I am fully aware that participating in the recreational event in which I am enrolling is a dangerous activity and I voluntarily participate in said activity with the knowledge of the danger involved and hereby agree to accept any and all risk of injury.

I have fully read this form and fully understand the contents thereof and hereby freely and willingly apply my signature below as my agreement to this release of liability form.

In consideration of your accepting this registration, I hereby, agree to indemnify and hold harmless Scott Durzo's Total Sport Camp, Los Alamitos Unified School District, Rossmoor Community Services District, City of Seal Beach, The Westerly School of Long Beach and its officers, agents, or employees from any liability of claim or action for damages resulting from or in any way arising out of the participation in this program by the person/persons registered above.

X \_\_\_\_\_ DATE: X \_\_\_\_\_  
PARENT/LEGAL GUARDIAN SIGNATURE

*Please print your PayPal receipt OR send a check with a completed registration form to:*

☺ Scott Durzo's Total Sport Camp, P.O. Box 871, Seal Beach, Ca., 90740. ☺