MARENGO WRESTLING CAMP 2012 REGISTRATION FORM

STUDENTS ENTERING $5^{th} - 12^{TH}$ GRADE JUNE 11- JULY 15 - \$45.00 (No camp on Wednesday)

5:00 - 7:00

Send registration form and payment to:

Marengo High School Athletic Department 110 Franks Rd. Marengo Rd. Marengo 60152

Check should be made out to Marengo High School Wrestling Camp

NO FORMAL CONFIRMATION WILL BE SENT. PLEASE DO NOT CALL FOR CONFIRMATION

Registration forms are due by June 3rd. There will be a \$10 charge for late registration.

Name: _______ Grade entering 2011-2012______

Address: _______ Age: _____ Sex: M F

Phone: ______ Emergency Phone ______

INSURANCE WAIVER

I understand that my son/daughter is not covered under medical/accident insurance and that I as a parent/ guardian am responsible for medical/accident insurance. Individual family

insurance will be used as a primary coverage if needed; and will not hold Marengo High

School District 154 responsible for any insurance coverage cost that may occur during the Marengo High School athletic camps/leagues and/or any activities associated with them.

Signature of Parent/Guardian:

Signature of Student

PAYMENT AMOUNT _____ Cash___ Check #___