



GREG JANVIER  
PRESIDENT/FOUNDER  
UNITED SPORTS YOUTH LEAGUE



Summer Camp Academy  
2016 Camper Enrollment  
**PHONE 212-256-1145 / FAX 212-731-0296**  
**www.usyl.org**

**Forms Must Be Filled Out Completely To Be Consider For Eligibility**

Please select your Child Camp to attend. (Please note all camp duration is 9am-4pm)  
*(Please note all camps includes enrichment academics, arts n craft and drama class)*

**\$1025.00 Full USL Academy Camp 6 week 7/6-8/12 \_\_\_\_\_**

**\$600.00 Half USL Camp 3 weeks \_\_\_\_\_**

- \$250.00 Basketball Camp 7/11-7/15 \_\_\_\_\_
- \$250.00 Volleyball 7/18-7/22 \_\_\_\_\_
- \$250.00 Soccer 7/25-7/29 \_\_\_\_\_
- \$250.00 Flag Football 8/1-8/5 \_\_\_\_\_
- \$275.00 USL Games 8/8-8/12 \_\_\_\_\_

**Sibling Discount**  
**\$100 off for every additional**  
child

Check for Additional Service:

- Extended hours **\$200** for the entire camp 7:30am-9am and 4:00pm-5:30pm \_\_\_\_\_

Fee includes a \$25 non-refundable registration fee

MAKE CHECKS OR MONEY ORDER PAYABLE TO:

**United Sports Youth League** PO Box 70041 Staten Island NY, 10307

**AGE GROUP:**    7-8 YEAR    9-10 YEARS    11-12 YEARS

CHILD NAME: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age (as of 7/1/16) \_\_\_\_\_ GENDER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Parent 2 Cell Phone : \_\_\_\_\_

Emergency Contact Person \_\_\_\_\_ Phone/Cell: \_\_\_\_\_ Relation: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_

Sibling Name: \_\_\_\_\_ Age \_\_\_\_\_ Sibling Attend Camp: Yes / No

MY CHILD HAS MEDICAL HISTORY: (Please Specify) \_\_\_\_\_

**PLEASE SPECIFY SHIRT (Youth or Adult )**    Small    Medium    Large    X Large    2 X Large

**Total Amount Enclose:** \_\_\_\_\_

**How did you hear about us?**

Newspaper    On-line Search    Outdoor Billboard    Flyer    Friend Other \_\_\_\_\_



**PARTICIPANT RELEASE OF LIABILITY AND  
ASSUMPTION OF RISK AGREEMENT  
\*\*\*READ BEFORE SIGNING\*\*\***

In consideration of being allowed to participate in any way in this Program, related events and activities, the undersigned child and his/her parent or legal guardian, jointly and severally, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death.
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation.
3. I willingly agree to comply with terms and conditions for participation. If I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS United Sports League INC, United Sports Youth League INC, and each of their officers, officials, agents and/or employees, other participants, sponsors, advertisers, and owners (collectively, "RELEASEES"), from any and all claims, demands, losses, and liability arising out of or related to any INJURY, DISABILITY OR DEATH I may suffer, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. United Sports Youth League/USL may use a picture, image or likeness of your child for promotional use. Yes \_\_\_\_\_ No \_\_\_\_\_

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

**FOR PARENTS/GUARDIANS:**

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liability incidents to my minor child's involvement or participation in this program as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

\_\_\_\_\_  
Parent/Guardian Name (Please Print)

\_\_\_\_\_  
Emergency Phone Number(s)

X \_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date