

All K-5th graders are invited to join us for a fundamental camp taught by the Wallace County High School Volleyball Team!

Registration Form

Child's Nam	e: Parent Na	ame:	
Child's Current Gra	de: Parent Pl	none Number:	
	Cost: \$15	/vouth	
	Cost: \$15	/youth	
	Make checks o	ut to WCHS	
Yo	ur child must be registered a	and paid for ahead of time!	
All Registration forms	and payment must be in the	WC REC DROPBOX by 9am on WED	, SEPT 25tl
Lauthorize my (shild to participate in t	he 2024 Wallace County Rec	reation
rauthorize my c	• •		leation
	Department Voll	leyball Camp.	
	 Signature	 Date	
	2.03.64.0	2 3.33	

We the parent(s) of the above named minor, who is participating in a Wallace County Recreation Department activity, hereby give my/our approval to his/her participation in any and all of the activities during the current season.

I/We assume all risks and hazards incidental to the conduct of the activities and transportation to and from the activities; I/We further hereby release, absolve, indemnify, and hold harmless the Wallace County, Wallace County Recreation Department, the employees, the organizers, volunteers, sponsors, and the supervisors, and/or all of them.

In case of injury to my/our child, I/We hereby waive all claims against the organizers, the sponsors or any of the supervisors appointed by them. I/We likewise release from responsibility any person transporting my/our child to or from the activities. The undersigned specifically acknowledge that the risk of injury exists and assume the risk with respect to practicing for or participating in any contact exhibition or an athletic or sports matter sponsored by the Wallace County Recreation Department.