

MONTANA STATE UNIVERSITY BILLINGS
DEPARTMENT OF INTERCOLLEGIATE ATHLETICS
MSUB Youth Summer Camp
June 17th – June 21st
Yellowjacket Field

Cost of Camp = \$109

REGISTRATION FORM

Register and pay online at <http://men.msubsoccer.com/youth-camp.cfm>

If you cannot register online please send the payment and registration forms to:

Yellowjacket Sports Camps
MSU Billings (Athletics)
1500 University Drive
Billings, MT 59101

Please call Tom Lohmann at 406-896-5904 if you have any questions. Thank you.

Participant's Name: _____ Age: _____ Gender: M F (Circle One)
Parent's Name: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Daytime Phone: (_____) _____ Other Phone: (_____) _____
E-Mail Address: _____

MSUB Athletics Event Name: MSOC2019 Youth Camp

T-Shirt Size (if one is advertised for this event): Youth Size : S, M, L **OR** Adult Size: S, M, L

Payment Enclosed (Check Amount): \$ _____

Charge my Visa **or** Mastercard (Circle one) Number: _____

Name on Card: _____

Expiration Date (mo. & yr.): _____

Signature for Credit Card Payment: _____

(Waiver form on back)

Please include **Insurance Information** with the **Signed Participation Agreement Form** below

MONTANA STATE UNIVERSITY BILLINGS DEPARTMENT OF INTERCOLLEGIATE ATHLETICS **IMPORTANT NOTES:**

(1) ALL PARTICIPANTS, AND IF UNDER 18, PARTICIPANT AND AT LEAST ONE PARENT MUST READ AND SIGN THE AGREEMENT TO PARTICPATE BELOW.

(2) MSU BILLINGS DOES NOT PROVIDE INSURANCE TO PAY FOR INJURIES SUSTAINED BY PARTICIPANTS. PARTICIPANT, OR IF UNDER 18, PARENT OR GUARDIAN MUST AGREE TO PAY FOR AN INJURY THE PARTICIPANT MIGHT SUSTAIN.

AGREEMENT TO PARTICIPATE

(PRIOR TO PARTICIPATION, THIS DOCUMENT MUST BE SIGNED BY EACH PARTICIPANT, AND IF UNDER 18, BY PARTICIPANT AND AT LEAST ONE PARENT).

Participation in individual and team sports activities is reasonably safe as long as certain guidelines are followed. Many sports and physical activities offer varying levels of aerobic and anaerobic training, conditioning, personal skill improvement, and competition experiences that can significantly improve muscular and cardiovascular (heart/lung) strength and endurance. Regardless of whether you compete in basketball, soccer, tennis, cross country, golf, softball, volleyball, baseball, cheerleading, or some other sport, it is extremely important you are healthy and physically fit in order to be prepared to practice and compete.

If you have any condition that might prevent you from participating safely or if you have had any previous injuries or complications from athletic participation, you are required to communicate that information to the leader of your tryout or event prior to your participation. By voluntarily deciding to participate in this event, you are affirmatively acknowledging that you are both physically fit enough and skilled enough to train, practice, and compete in a safe and reasonable manner. If at any time you are uncertain of your physical condition or health status, you should not participate until you have communicated that information to your camp or event leader and you have been cleared to participate.

Although the likelihood is minimized if you participate carefully, there is always the possibility of injury when you place extra demands on the muscles, bones, joints, and ligaments in a training or competitive environment. Injuries that can occur as a result of your participation in this tryout or event include but are not necessarily limited to the following: blisters; muscle strains; joint dislocations; ligament and joint sprains; joint soreness; abrasions; contusions; stress fractures; broken bones; and head, neck, and spinal cord injuries involving paralysis and even death. However, if you exercise care for your own safety and the safety of other participants, the likelihood of such injuries can be greatly reduced.

By signing this form, you are acknowledging that you know, understand, and appreciate the various risks associated with your specific sport or activity. Furthermore, you agree to accept and assume those risks inherent to your sport or activity. In addition, by signing this form, you know, understand, and agree to accept the financial cost of any injuries you might sustain while participating in this tryout or event. Finally, by signing this form, you acknowledge all of your questions, if any, have been answered to your satisfaction.

(Printed Name of Participant) (Signature of Participant) (Date)

(Signature of Parent if Participant is Under Age 18) (Date)

Medical Insurance Information:

Medical Insurance Provider Name of Subscriber

Group Number Identification Number