

# Academy Registration

**Cost: \$80**

## Session Attending:

**1** – June 6-9, 2005, (deadline May 30, 2005)

**2** – July 5-8, 2005, (deadline June 30, 2005)

Name \_\_\_\_\_ M/F

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Birth date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Last grade completed \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Phone \_\_\_\_\_

e-mail \_\_\_\_\_

Please check your position

field player

goalkeeper

T-shirt Size (adult sized)

S          M          L          XL

## Medical Release and Photography Release Statements

These statements must be signed by parent/guardian before the child can participate in camp.

I certify that my child is physically fit for all soccer camp activities and grant permission in case of injury, accident or illness that he/she be treated by a licensed physician. Furthermore, I release the University of Texas at Tyler, its officers, directors and all associated with the camp from any and all liability for personal injury arising out of the applicant's participation in the camp.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

I agree to allow the participant listed above to participate in the photo opportunities available at The University of Texas at Tyler and give UT Tyler permission to use photos of my child in any advertising or marketing promotions (print, electronic, outdoor advertising, faculty presentations, publication). All prints, slides and digital images belong to UT Tyler solely and completely.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_