THE CHUTE CAMP APPLICATION FORM

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PLEASE PRINT CLEARLY

Please make checks payable to: THE CHUTE

| Please indicate the amo | ount being paid at this time |
|-------------------------|------------------------------|
| _ Deposit: | \$ |
| OR Full Amount: | \$ |
| _ Check #: | Cash |

| Site of Camp | | | _ Dates o | of Camp |
|--|---|---|---|---|
| School You Attend: | | | | Grade |
| ☐ Boy ☐ Girl | | | | (refers to athlete's grade next year) |
| Mailing Address | | | _ City_ | |
| State Zip | Phone | | E-mail_ | |
| T-shirts: Adult Sizes | ☐ SM ☐ MD ☐ | LG 🗌 XL 🗌 | XXL | Youth Size LG |
| | e fill out the Liability/Wa | aiver Agreement be | low. Mal | ke checks payable to: The Chute. |
| We/I authorize the emergency. We/of injury. I agree claim, demands, and understand i | Liability / he staff members to act in the staff members to act in juries, damages, act in the staff members and agree to all of it | Waiver Agreement be Waiver Age of in the best into e is not provided irector and staff it ions or causes of it. | green erest of cand their members actions. | nent our/my child in case of refore, we/I assume all risks shall not be liable for any I have read this agreement |
| We/I authorize the emergency. We/of injury. I agree claim, demands, and understand i | Liability / he staff members to act in the staff members to act in juries, damages, act in the staff members and agree to all of it | Waiver Agreement be Waiver Age of in the best into e is not provided irector and staff it ions or causes of it. | green erest of cand their members actions. | nent our/my child in case of refore, we/I assume all risks s shall not be liable for any |

Please send your non-refundable \$30.00 deposit with you application and siged waiver. Thank you.