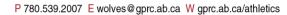


Wolves Smashball Registration, Liability and Waiver Form

Smashball is a super fun game that introduces children 6-11 to the game of volleyball. The skill that every child wants to learn in volleyball is spiking (hitting). Smashball is a progressive volleyball learning program that begins with this skill and teaches students the flow of the game through four different levels.

Participan	nt information				
			Middle Name: Preferred Name:		
Address:City:		City:	Postal Code:		
Parent First N	Name:	Pa	arent Last Name:	 	
Phone (H):Ph		hone (C):	Email:		
Emergency o	contact (other than parent/gua	ırdian above):			
Phone:					
Phone:		All	perta Health Care #:		
Have you ap	oplied for Kidsport or Jump	start funding? Ye	oerta Health Care #:s • No • Please visit kidsport		
Have you ap jumpstart.ca		start funding? Ye rmation.	s • No • Please visit kidsport		
Have you ap jumpstart.ca	oplied for Kidsport or Jump anadiantire.ca for more info	start funding? Ye rmation.	s • No • Please visit kidsport		
Have you ap jumpstart.ca	oplied for Kidsport or Jumps anadiantire.ca for more info I Is the waiver form complete	start funding? Ye rmation. ed and signed on th	s • No • Please visit kidsport		
Have you ap jumpstart.ca	oplied for Kidsport or Jumps anadiantire.ca for more info I Is the waiver form complete	start funding? Ye rmation. ed and signed on the start funding of the start for the start funding start for the start funding sta	s • No • Please visit kidsport ne back?		Payment Type
Have you ap jumpstart.ca	oplied for Kidsport or Jumps anadiantire.ca for more info Γ! Is the waiver form complete FOR O	start funding? Ye rmation. ed and signed on the FFICE USE ONLY TO Dates Monday **April 1st sess	s • No • Please visit kidsport ne back? BE COMPLETED BY STAFF rs & Wednesday 4 weeks	canada.ca or	I







Student Name:	Camp:
	erience and information gathered below assist our staff in programming and ept confidential. The personal information on this form is collected under the aid privacy act.
Does your child have allergies or medical conditions? Yes Explain the procedure involved in dealing with your child's	No • allergic or medical condition (if applicable)
Will your child need medications during the camp? If yes, p	please explain.
Has your child been diagnosed with a condition that affects please explain.	s learning, a psychiatric diagnosis or an emotional health concern? If yes,
Do you wish to pass along any concerns of this nature that	have not been diagnosed?
	ally Aggressive Withdrawn/Shy Temper Tantrums hods of dealing with this behavior:
Is your child susceptible to headaches, nosebleeds, fainting	g, colds, sinus problems, heat sensitivity or any other physical ailments? If
yes, please explain.	
Is your child susceptible to digestive ailments? Is your child susceptible or does your child presently have j	joint pains or injuries? If yes, please explain.
Is your child susceptible or have a history of concussions?	
Is your child susceptible or presently has back pains or pro	blems? If yes, please explain.
Liability and consent release	
that withholding information may contribute to injury, illness	tion revealed in the above document is accurate and truthful. I understand s, or death and possibly compromise the care provided in the event of an ument changes prior to or during the program I will immediately notify the
Signed:	<u></u>
	he above-mentioned applicant agree to hold blameless the officials or any loss, damage of injury suffered during games or practices, sanctioned by
Signed:	
property of GPRC and will not be returned. The usage of the program, promotional material such as posters, postcards,	ke my child's photo during the program. These materials will become the ne pictures will be as follows: group picture given to all children attending the flyers, and photos on the GPRC website/social media. GPRC reserves the and that there will be no compensation to me for the use of the photographs.
Signed:	