REGISTRATION FOR 2008 RUHS SUMMER RUNNING CAMP

Name	School: REDONDO UNION HIGH SCHO	
(please print) Grade Ma	ale Female	
	City	Zip
	Emergency Phone	-
In case of an emergency, ple	ease notify:	
5 <i>y</i>	,	(name)
Address Any allergies, sensitivities to	o foods or medications?	Phone
Date of last Tetanus Shot	Currently taking any	/ medication? Yes / No
Family Doctor:	Telephone: ()
Address	City	Zip
	istration form, (2.)behavior contrac David Dill 932 S. Juanita Avenue Redondo Beach, Ca 90277 (310) 540-7005 (310) 894-1855 cell f at the above address or give to C	
Camp begins: Sunda	ay August 3, 2008 Camp ends	: Friday, August 18, 2008
California on the dates indicated about and release forever any and all right RUHS Cross Country/Track Booster representatives, successors or assign out of or in any way connected with all related events or activities, including I am under eighteen (18) years	to the RUHS High Summer Camp to be he ove, I hereby for myself, my heirs, execut ts, claims or causes of action whatsoever r Club, the adult counselors and coaches gns for any injury, death, or property dam the RUHS High Sunner Camp and RUHS ding traveling to and from said camp. s of age my parent or legal guardian has s above provisions. Parents hereby agree	ors, administrators and assigns waive that I may now or hereafter have against attending said camp, or their age that may be suffered by me arising a Cross Country/Track Booster Club, and signed below as well to indicate their
Signature in full	date	

date

Parent's signature if under 18 years of age