## **REGISTRATION FOR 2010 RUHS SUMMER RUNNING CAMP**

Name	School: <u>REDONDO UNION HIGH SCHOOL</u>
(please print)  Grade M	ale Female
Address	City Zip
	Emergency Phone: ()
In case of an emergency, p	lease notify:
	( )
Address Any allergies, sensitivities	to foods or medications?
Date of last Tetanus Shot_	Currently taking any medication? Yes / No
Family Doctor:	Telephone: ()
Address	City Zip
Please make checks pa Mail completed (1.) <u>rec</u>	are limited to 40 people so don't get left out!  ayable to RUHS CROSS COUNTRY/TRACK BOOSTER CLUB gistration form, (2.)behavior contract and (3.) payment in full to:  RUHS XC/Track Booster Club  932 S. Juanita Avenue  Redondo Beach, Ca 90277  (310) 540-7005  (310) 894-1855 cell o drop off at the above address or give to Coach Bob.
Camp begins: Sund	day August 1, 2010 Camp ends: Friday, August 6, 2010
Lake, California on the dates indica waive and release forever any and against RUHS Cross Country/Tracl representatives, successors or assout of or in any way connected with Club, and all related events or activity If I am under eighteen (18) years of	to the RUHS SUMMER RUNNING CAMP to be held at the PCCCI in Big Bear ated above, I hereby for myself, my heirs, executors, administrators and assigns all rights, claims or causes of action whatsoever that I may now or hereafter have a Booster Club, the adult counselors and coaches attending said camp, or their igns for any injury, death, or property damage that may be suffered by me arising the RUHS SUMMER RUNNING CAMP and RUHS Cross Country/Track Booster wities, including traveling to and from said camp.  If age my parent or legal guardian has signed below as well to indicate their above provisions. Parents hereby agree they are responsible for the actions of
Signature in full	date

date

Parent's signature if under 18 years of age