



February Vacation CATZ Camp

February 16, 2010 - February 19, 2010

Child's Name: _____

Parent/Guardian's Name: _____

Phone: _____ Cell/Emergency Phone: _____

Address: _____

E-mail: _____

Child's Date of Birth: _____ Age/Grade: _____

Camp will run Tuesday 2/16 through Friday 2/19 from 9am-12pm in the Glover School gym. Participants will be divided into two groups (K-2, 3-5).

Total Cost - \$85 (payment required to reserve a spot, space is limited to 40)

(Please select Payment Method)

- Cash
- Check
- Credit Card (anything but American Express)

Type: _____

Number: _____

Exp: _____

To sign up or learn more about the CATZ camp, please call us at 781.749.3838 or email info.ss@catzsports.com. This form may be mailed to CATZ-Hingham at 35 Pond Park Rd. Hingham, MA 02043 or faxed to 781.749.3848. Please make checks payable to "CATZ."

Release of liability/Acknowledgment of Risk:

Upon entering events sponsored by CATZ, I/We understand and appreciate that participation or observation of the sport constitutes a risk to me/ us of all personal injury. I/We voluntarily and knowingly recognize, accept, and assume this risk and release CATZ, its affiliates, their sponsors, event organizers and officials from any liability therefore.

Signature of Parent/Legal Guardian _____ Date: _____