

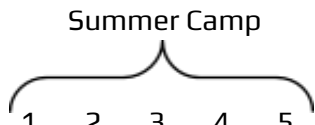
EST Sports Camp/Clinic Consent Form

**Full Payment/
Deposit Options:** \$100 Deposit

- Venmo (acct# @ritlacomis / last 4 of ph. no. = 7880)
- Zelle (acct# 2038567880 or rlacomis28@gmail.com)
- Cash - 1st day of camp

******Email to registration@estsports.org to complete your registration******

Parental Consent: (Must be signed to complete enrollment)

Player's Name: _____ **Session(s):**  1 2 3 4 5 Fall Winter
(Circle all that apply)

I understand that my child's participation in Elite Sports Training camps/clinics may result in various types of injuries associated with athletics (in rare cases paralysis, and in the rarest of cases death) and I approve of their partaking in the camp/clinic. I will not hold any of the camp instructors liable for any injury my child may sustain while performing the various activities being offered during the Elite Sports Training camp/clinic.

Throughout camps/clinics, pictures and video may be taken of players performing various drills and sport related activities. EST uses this footage on their website and social media pages to promote the company and demonstrate to prospective campers what they will engage in when registering for an EST Sports camp/clinic.

Parent / Guardian Name

Parent / Guardian Signature

For Use With Daily Drop-Ins Only - DO NOT fill out if already registered

Emergency Contact Info:

Name: _____

Phone #: _____