Hondo Owl Summer Camp Registration

Student Name: _____

Gender: Male or Female 2021-2022 Grade: _____

Parent/Guardian Name: _____

Parent/Guardian Phone Number _____

Emergency Contact: _____

Emergency Contact Phone Number: _____

Please circle the camp/camps you plan to attend:

(please see the Camp flier for specific information for each camp)

BOYS:	**GIRLS:**
Basketball	Basketball
Soccer	Soccer
Tennis	Tennis
Baseball	Softball
Golf	Golf
Football	Volleyball

You may bring form along with payment (cash or check) to any campus PE teacher or submit payment along with registration form to:

Hondo Athletics
P.O. Box 308
Hondo, TX 78861
Please make checks payable to 'Hondo Athletics'

Parent and Participation Agreements:

- I give permission for my student to participate in all activities during 'Hondo Owl Summer Camps'. I am not aware of any medical problems that would prohibit my student from participating in the program.
- I release the Hondo ISD, its employees, and agents from all responsibility and liability in case of physical injury or loss of personal property.
- I understand I may not leave my student unless a staff member is present at the facility.
- I understand my student will need supervision and transportation promptly when the course ends each day.
- I understand my student may be removed from 'Hondo Owl Summer Camps' for failure to observe the HISD Student Code of Conduct and Owl Pride Honor Code or inappropriate behavior that endangers themselves or others.

Parent/Guardian Signature **Date**