

**UMBC All Sports Camp Application**

Child's Name \_\_\_\_\_  
Grade Entering in 2009-2010 School Year \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_  
Home Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
E-mail \_\_\_\_\_

**Session Attending:** \_\_\_\_\_ **Shirt Size** \_\_\_\_\_

ALL SPORTS CAMP

YOUTH XS, S, M, L, XL,  
ADULT S, M, L, XL

Parents/Guardians' Names \_\_\_\_\_

Occupation \_\_\_\_\_ Phone Num \_\_\_\_\_  
Occupation \_\_\_\_\_ Phone Num \_\_\_\_\_

Other Children in Family: \_\_\_\_\_

In case of emergency, name and number of person to notify:

Name \_\_\_\_\_ Phone Num \_\_\_\_\_  
Name \_\_\_\_\_ Phone Num \_\_\_\_\_

Are there any medical problems that would prevent the child's participation in day camp activities? Yes No

If yes, please state \_\_\_\_\_

I, \_\_\_\_\_ (parent/guardian), in consideration of the acceptance of \_\_\_\_\_ (child's name) as a UMBC All Sports camper, hereby agree to comply with the terms stated on the General Information Sheet/Brochure and UMBC All Sports Camp website.

\_\_\_\_\_  
Signature Date

NOTE: The \$50 registration fee must accompany this application. A physical examination should be completed **before the start of the camp session your child is attending**. Payment of the registration fee will hold a place in the camp for your child and is a part of the tuition. Payment in full is due **one week** prior to the session start date. Failure to pay by the pay date will result in a \$25 late payment fee. Cancellations after the payment deadline will result in a \$50 late cancellation fee. All questions should be directed to the assistant camp director, Mike D'Archangelo. **THIS FORM MUST BE SIGNED PRIOR TO YOUR CHILD ATTENDING**