

TEXAS YOUNGGUNS - Thirst 4 First Camp

LOCATION: LONESTAR BMX , SAN ANTONIO, TX

OCTOBER 15-16, 2011 10-3 SAT & SUN

COST: \$100 which includes lunch and snack

Name _____
Age _____ Class _____ ABA# _____ EXP. _____
Address ** _____
City _____ State _____ ZIP _____
Email _____ Home Phone _____
Cell Phone _____ Work phone _____
Emergency Contact : _____ Phone _____

MEDICAL INFORMATION

Does this child have any disabilities, handicaps, heart conditions, or history of respiratory illness or any other significant conditions?

YES NO (please circle one - If yes, please list on back. Please include times and dosage of medication if needed)

INSURANCE INFORMATION

Insurance Company: _____ Phone: _____
Address: _____ City / State / ZIP: _____
Insured: _____ ID: _____
Group #: _____

Signature of Parent/Guardian _____ DATE: _____

EMERGENCY AUTHORIZATION

I, the undersigned, parent or legal guardian of the participant, a minor, hereby authorizes trainers acting in the capacity as my agent, to consent to medical, surgical, or dental examination and or treatment. In case of emergency I hereby authorize treatment and/or care at any hospital .

RELEASE FORM / WAIVER OF LIABILITY AND DISCLAIMER

To induce TEXAS YOUNGGUNS CLINICS to accept, register, and permit participation in training clinics by the named individual, I the parent or guardian of said minor, hereby give my consent and agree to release, indemnify and hold harmless TEXAS YOUNGGUNS CLINICS & OFFICIALS and YOUNG GUNS BMX, LLC, from any claim arising from injury or death to named individual. I certify that the above named is current member of the AMERICAN BICYCLE ASSOCIATION in good standing.

Signature of Parent/Guardian _____ DATE: _____

CAMP T SHIRT : PREORDERED only \$15

Pit Dad's Mechanic Clinic \$10 either day/
\$15 both

PLEASE SELECT SIZE

ADULT: S _____
M _____
L _____
XL _____

Sat. – Bike Basics and Maintenance

Sun. – Advanced Mechanics

*** Free raffle ticket for a PitDad only raffle
for each day you're pre-registered for.

PAYMENT INFORMATION:

CASH _____ only accepted in person at LoneStar or HOTBMX

CHECK _____ Checks must be received by October 5th, 2011.
There is a \$25 returned check fee.

MAIL CHECKS TO: Heather Hill, 15815 Neenah Oak Loop, Austin, TX, 78717

PAYPAL _____ There will be a 5% fee for paypal payments.
Payments must be received by October 5th
for these payments. Paypal payments need to
be sent to Heather Hill, paypal account:
crash813@sbcglobal.net. Please include your
name and child's name on payment.

Camp Fee \$100 x _____ = _____
T Shirt \$15 x _____ = _____

Pit Dad Clinic ... \$10 or \$15 = _____

TOTAL = _____

Questions:

Email Mark McArthur at:
Txbmxe003@aol.com

REFUND POLICY There will be NO refunds for any reason unless event is canceled by Organizer due to weather. INITIAL _____

Signature of Parent/Guardian _____ DATE: _____