

**2010 PRE REGISTRATION FORM : Location: TBD**

**Dates:** Mon-Thurs 9:00 a.m. until 4:00 p.m. Tuesday July 6<sup>th</sup>-August 12<sup>th</sup>, 2010

Student-Athlete Name: \_\_\_\_\_

School Name **and** Grade for **2010-2011**:(GRADE GOING IN) \_\_\_\_\_

Last Grade Completed: \_\_\_\_\_ Age as of 7/12/10: \_\_\_\_\_ DOB: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Gender: Male or Female

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_ ParentName(print): \_\_\_\_\_

Allergies: \_\_\_\_\_

Emergency Name and Number: \_\_\_\_\_

T-shirt Sizes: YS YM YL AS AM AL AXL

**Cost for 6 week program: (includes 3 t-shirts): \$180.00**

**ABSOLUTELY NO REGISTRATION spot will be held without payment. NO EXCEPTIONS**

Payment along with fully completed registration packet may be mailed to:

ROC E6, Inc. PO Box 67865, Rochester, NY, 14617

Make a copy of this form and your payment for your records.

Check or money order number and amount: \_\_\_\_\_

**\*\*Mandatory Volunteering:** Parents must volunteer a minimum of 4 hours total to the program per child. Parents that wish to "Buy Out" their volunteer hours may do so for \$25.00 per child. This amount is due on Tuesday, July 6<sup>th</sup>, 2010.

Parents that do not show up for their scheduled volunteer hours will **be charged \$25.00** (unless the volunteer coordinator is contacted 24 hours prior to the scheduled volunteer time and a new date is confirmed). If payment is not made, your child will sit out of all sports activities until payment is made.

**\*\*Additional Costs:** extra t-shirts, camp field trips, school supplies, etc. will be determined prior to July 12<sup>th</sup>.

**\*\*Email:** Camp information is **ALWAYS** emailed. You are strongly encouraged to activate and check your email account daily for camp updates. Please be sure your email address is readable!

**\*\*Food Services:** Breakfast and Lunch will be provided daily.

**\*\*Proper Attire:** Gym shorts (without zippers or buckles) and sneakers must be worn daily (NO Sandals). Camp t-shirts must be worn daily according to the t-shirt calendar that will be provided on opening day.

**\*\*Participation:** All student-athletes will be expected to participate in all classes and sports.

**\*\*Testing:** Students **must attend** camp on July 6,7,8 and August 9,10,11 for testing purposes.

**\*\*Attendance:** Due to the educational component of this program, daily attendance is mandatory. Student-athletes that miss more than two days of camp without prior notification may be dismissed from the program.

**\*\*Proper Conduct:** Proper conduct is expected at all times. Inappropriate behavior may lead to afternoon detention in place of sports activities, or in severe cases; dismissal from the program.

Student-Athlete Name: \_\_\_\_\_

**ADMINISTRATION OF MEDICATION:** I hereby consent for my child, \_\_\_\_\_, to be administered the following medications \_\_\_\_\_ by the ROC E6, Inc. staff. I understand and agree that the ROC E6, Inc. staff does not have a Registered Nurse on staff and that medication(s) will be administered to my child by a staff associate based on the instructions below.

I, the undersigned am the parent or legal guardian of \_\_\_\_\_, with full authority to make and delegate decisions regarding this child's health. All of the health information recorded on this form is correct, and I have not omitted any health information necessary for the proper care of this child. A physician has examined this child and reviewed this child's general health within the past 12 months. I authorize ROC E6, Inc. to administer prescription and non-prescription medications as indicated below.

Student-athletes Name: \_\_\_\_\_

Condition: \_\_\_\_\_

Medication: \_\_\_\_\_

Time in which to dispense Medication: \_\_\_\_\_

Special instructions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I waive any claims, for myself and on behalf of this child, against ROC E6, Inc., and/or its agents, arising in connection with any of the activities or decisions authorized above. A photocopy of this signed authorization is as binding as the original.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

**PHOTO CONSENT:** I, \_\_\_\_\_ (parent or guardian) hereby consent that all photographs taken of \_\_\_\_\_ (student-athlete) by ROC E6, Inc and its affiliates may be used by ROC E6, Inc for publication on the company's web-site, newspaper articles or any purpose ROC E6, Inc deems proper.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

**FIELD TRIP CONSENT:** I hereby consent for my child, \_\_\_\_\_, to take field trips as a part of the ROC E6, Inc. 2010 Summer Program. Transportation for field trips may be provided by an independent transportation system, walking or RTS bus. My signature below is my consent to have my child participate and be transported under the above conditions. In case of emergency during field trips, or during the day, I may be reached at \_\_\_\_\_.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

**ROC E6 Parent/Guardian Waiver & Participation Agreement**

As a participant in any ROC E6 sports program I agree to the following rules:

- I understand that the purpose of all sports events is to develop the ability, skills, teamwork and character of ALL participants, not just myself.
- I understand that the coach will determine playing time and I agree to play any position I am asked to the best of my ability.
- Fighting, swearing or abusive language on the field or at team events will not be tolerated.
- I will accept official's rulings on the field without question. The coaching staff will handle all officiating matters.
- There will be no alcohol, smoking or chewing of tobacco, or use of illegal substances at any ROC E6 event.
- I understand that my actions ON and OFF the field reflect my CHARACTER as well as that of my teammates, my coaches, my parents and ROC E6, Inc.,
- I will conduct myself with DIGNITY, display GOOD SPORTSMANSHIP, and show RESPECT for myself, my teammates and coaches, officials, opponents and spectators.
- I understand that violation of these rules may result in disciplinary action determined by the coaching staff or ROC E6, Inc.,
- I will respect the property, equipment used and sports facility, both home and away.
- I understand that I must be in good academic standing at all times, in order to participate in any event.
- I agree to adhere to tutoring rules of ROC E6, Inc if my academic responsibilities are not adhered to.

I have read the rules above and agree to abide by these rules.

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

Printed Name \_\_\_\_\_

As a parent/legal guardian of a child participating in a program of ROC E6, Inc. I agree to the following rules:

- I will promote the emotional and physical well-being of the athletes ahead of any personal desire to win.
- I will encourage GOOD SPORTSMANSHIP through my actions by demonstrating positive support for all players. I agree that my child plays sports for her/his enjoyment, not mine.
- I will provide support for coaches and officials working with the athletes to provide a POSITIVE experience for all.
- I agree that the coaches' make the decisions regarding playing time and positions played for all athletes. I will agree to schedule any discussion with the coach about my athlete for a time convenient for the coach and myself.
- I will treat all players, coaches, officials, parents and spectators with DIGNITY in language, attitude, behavior and mannerisms.
- We, parent and athlete, will treat all players, coaches, officials, and spectators with RESPECT regardless of race, creed, color, sex or ability.
- I will inform the coach of any physical disability, ailment or limitation that may affect the SAFETY of my athlete or the safety of others.
- I will respect the property, equipment used and sports facility, both home and away.

I have read the rules above and agree to abide by these rules.

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

Printed Name \_\_\_\_\_

Equipment Responsibility:

I agree to assume full responsibility for any and all equipment/uniforms loaned to the above named participant and I agree to promptly return, upon request, the uniform and equipment issued to the above named participant in as good condition as when received except for normal wear and tear. If I fail to adhere to this policy, I will be responsible for the replacement cost of such equipment.

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