



All Sports Day Camp

Registration Form

All Activities will be held at Rock Creek Park-Dawson County

Participant's Name _____ Date of Birth ___ / ___ / ___

Age _____ Gender M F Home Phone _____

Address _____

Mother's Name _____ Cell Phone _____

Father's Name _____ Cell Phone _____

Email Address _____

Allergies or Disabilities Yes No If yes, explain _____

Additional people that may pick up _____

Some activities offered during camp are:

- Basketball -Ultimate Frisbee -Kickball -Soccer -Dodge ball -Relay Races
- Baseball -Homerun Derby -Bowling -Putt Putt -Tennis....and much more!!

_____ All Sports Day Camp-Session 1 June 3rd-7th \$135 9:00-3:00 Ages 5-13

_____ All Sports Day Camp-Session 2 June 17th-21st \$135 9:00-3:00 Ages 5-13
No camp on June 19th due to Juneteenth holiday

_____ Early Drop off Late Pick-up Both day camps add \$30 8:00-4:00

Day campers should bring a snack, water bottle, and sack lunch to camp each day.

Mail registration and payment to: 7915 Silversmith Dr. Cumming, GA 30028 or drop off at Rock Creek Park Desk-Cash or Check- Make checks payable to Ty Carnes
Contact Coach Ty Carnes with questions 404-226-7225 or tcarnes@forsyth.k12.ga.us

I hereby acknowledge that I am familiar with all risks and hazards incidental to participation, and I further hereby assume all risks and hazards incidental to such participation including, but not limited to, transportation to and from the activities. In exchange for the valuable participation in such activity, I hereby release, absolve, and agree to not hold Dawson County, Dawson County Parks and Recreation Board, sponsors, supervisors, coaches, participants, persons transporting the participant, and all other persons and legal entities acting on behalf of Dawson County and Dawson County Parks and Recreation Board in connection with such activity from any act of negligence associated with the activity.
By signing below, I understand that payment is due at the time of registration. I also acknowledge that I have received a copy of, read, and understand the Dawson County Parks and Recreation Rules, Zero Tolerance Policy, and Refund Policy.

Signature of Parent/Guardian _____ Date _____