

The Next Step Field Hockey

110 Jobs Hill Road, Apt. #39

Ellington, CT 06029

Player's Name _____ Age _____

Street _____ Town _____ Zip _____

School Attending _____ Grade _____

Parent /Guardian _____

Phone (Home) _____ (Cell) _____

Name of person to notify in case of an emergency _____

Player's Physician _____ Phone _____

Health Insurance Co. _____

Phone _____ Policy # _____

I here by give my permission for my daughter to participate in The Next Step Field Hockey summer camp, and authorize and grant to the coaches/staff and or/any related assistant associated with the, The Next Step Field Hockey Camp permission to administer medical or related care or treatment for my daughter. Such permission shall include, without limitation, care and treatment of injuries and illnesses and the administration of medication orally or by injection, and all such treatment as is deemed necessary in case of an emergency, including a minor surgical procedure when recommended by a physician or other type of medical personnel who is a member of any hospital staff or emergency rescue unit. Furthermore, I authorize any treating hospital or other medical facility and/or medical facility and/or physician to release to the staff of the, The Next Step Field Hockey Camp all information related to the diagnosis, treatment and prognosis of any medical or similar problem in order to enable the Company to determine the appropriate course of action to be taken regarding my above named daughter. I further herby agree to indemnify and hold harmless the, The Next Step Field Hockey, its agents, servants or staff, of, from and against any and all liability which the said Company, its agents, servants or staff may incur as a result of any medical decisions or treatments. I hereby acknowledge that the program may present physical challenges and dangers, and hereby assume any and all risks which may be associated with my child's participation in the activities associated with the program, and waive and release all rights and claims for damages against The Next Step Field Hockey Camp, its agents, servants or staff for any and all damages or injuries suffered by the above-named individual while participating in The Next Step Field Hockey Camp.

Parent/Guardian Signature _____ Date _____