

617-924-4466 100 Parker Street, Watertown, MA 02472 fencingacademyofboston@gmail.com www.fencingacademyofboston.com

Summer Fencing Camp Registration

Fencer's Name:		YEAR OF BIRTH:			
Inst	irance regulations require membe Join or renew online at https:/	•	•		
Fencer's USA Fencing Membership Number:			Exp. Date:		
Name of Parent or (Guardian:				
Relationship to Fenc	er:				
Email address:					
Address:					
Phone I:	Pł	none 2:			
Primary Weapon:	or circleNONE	Primary Coa	ıch:		
	<u>Fencing Camp Sessio</u>	<u></u>			
	General Sessions – Begin July 22-26 July 29-August 2 August 5-9 August 12-16	xaners Welcom \$450 \$450 \$450 \$450 \$450 \$450			For office use only
	General Sessions – Begin Image: July 22-26 Image: July 29-August 2 Image: July 29-August 3-9 Image: July 29-August 12-16	\$450 \$450 \$450 \$450 \$450			For office use only
	General Sessions – Begin July 22-26 July 29-August 2 August 5-9 August 12-16	xaners Welcom \$450 \$450 \$450 \$450 \$450 \$450			For office use only

Minimum \$50 Deposit per Session Required when Registering

O Check Enclosed for \$ _____ (Please make Checks Payable to: Fencing Academy of Boston)

O Contact me for Credit/Debit Payment

continued on other side



<u>Waiver and Consent</u>

Emergency Contact 1:	Relationship:	Phone:
Emergency Contact 2:	Relationship:	Phone:

Place the word "yes" in the space after reading each paragraph to indicate your acceptance.

Assumption of Risk. Fencing, like any athletic activity, involves physical exertion and risk of injury. Fencers and spectators assume the risk of any injury or medical condition arising from their participation in fencing at Fencing Academy of Boston. _____

Waiver of Liability. I understand and appreciate that participation in a sport carries a risk to me or the minor under my guardianship of serious injury, including permanent paralysis or death. Intending to be legally bound, I hereby release for myself, any minor under my guardianship, heirs, executors, and administrators, any and all rights and claims for damages against the Fencing Academy of Boston, its sponsors, coaches, instructors, officials, members, guests, associates, investors, and other participants, and the United States Fencing Association, for any and all injuries or loss or damages incurred as a result of participation in the Fencing Academy of Boston fencing program or any use of its facilities.

Consent to the Code of Conduct. I have read and accept my responsibility and any minor under my guardianship's responsibility to abide by the Fencing Academy of Boston's Code of Conduct attached hereto.

Signatures below indicate that the above information is true and correct, that the required fees will be paid, and the Assumption of Risk, Waiver of Liability, and Consent to the Code of Conduct are agreed to and accepted by me on my behalf or on behalf of a minor under my guardianship:

Member's Signature:		Date:		
	(Fencer must sign if over 18.)			
Parent's or Legal				
Guardian's Signature:		Date:		
(A parent or legal guardian must sign for fencers under the age of 18.)				

Additional Consent. I give my permission for my minor child or ward to participate in Fencing Academy of Boston programs, classes, and lessons.

Parent's or Legal Guardian's Signature: _____ Date:

Images and Identification. I grant permission to Fencing Academy of Boston to use, reproduce, distribute and/or publicize my photographic likeness and/or the photographic likeness of the minor under my guardianship with or without identification. Publication, use and distribution of any photographic likeness of myself or my child or ward may be by any means and in any media, including brochures, pamphlets, instructional materials, newspapers, magazines, television, books, social media, Internet, and web pages. I understand that consent is voluntary and may be revoked in writing at any time.

Member's Signature:		Date:		
	(Fencer must sign if over 18.)			
Parent's or Legal				
Guardian's Signature:		Date:		
(A parent or legal guardian must sign for fencers under the age of 18.)				

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