



University of Mobile

Training Team Program



Mail this completed form with \$150.00 non-refundable deposit to reserve your space in the training program.

There will be a \$25 fee for all returned checks.

Checks made payable and mailed to Amber Campbell, 13320 Roberts Road, Chunchula, AL 36521.

NAME _____ AGE _____ GRADE _____ DATE OF BIRTH _____

CURRENT SCHOOL _____ TSHIRT SIZE (YM- Adult XL) _____

HOME ADDRESS _____

PHONE NUMBER _____ EMAIL ADDRESS _____

All correspondence will be conducted by email. Please PRINT LEGIBLY as to avoid any delay in communication.

INSURANCE/MEDICAL INFORMATION AND WAIVER

PARENT/GUARDIAN NAME _____ PHONE NUMBER _____

In the event of an emergency you are unable to contact me, please call _____ at this phone number _____.

Family Physician _____ Phone number _____

Please note any medical condition(s) that coaches should be aware of: _____

I, the undersigned, do hereby give my permission for my daughter to participate in the above stated University of Mobile Training Team Program. I understand that the University of Mobile, the staff, and adults in charge cannot be held liable for any accident that may occur during the course of this volleyball activity.

I also attest to the fact that _____ is covered by insurance through the following _____ Policy# _____. I understand that financial obligations incurred for medical services resulting from an injury received by my daughter while participating in this activity cannot be borne by University of Mobile, the facility, or the staff/adults in charge.

Parent/Guardian Signature _____ Date _____

I am enclosing the registration form with the check made payable to Amber Campbell. I understand that there are **NO REFUNDS** once my child is registered in the training program. I give my daughter permission to participate in the UM Training Program and attest to the fact that she is in good medical condition.

Parent/Guardian Signature _____ Date _____

Mail registration and check to: Amber Campbell, 13320 Roberts Road, Chunchula, AL 36521