

## 2007-2008 CCBC Catonsville Sports Camp and League Registration and Permission Form

(You may register up to three persons from the same household on this form. **Make checks payable to: CCBC Catonsville**)

Camper's Name	Gender	Age	Grade	School
1.				
2.				
3.				

Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Please check program choice(s) or enter session # (s) in appropriate blank:

<input type="checkbox"/> Baseball Camp #1	<input type="checkbox"/> Boys Lacrosse League	<input type="checkbox"/> Softball Camp #1
<input type="checkbox"/> Baseball Camp #2	<input type="checkbox"/> Girls Lacrosse League	<input type="checkbox"/> Softball Camp #2
<input type="checkbox"/> Baseball Camp #3	<input type="checkbox"/> Soccer 9 v 9 League Girls	<input type="checkbox"/> Softball Camp #3
<input type="checkbox"/> Baseball Camp #4	<input type="checkbox"/> Winter Warm-Up (Girls)	<input type="checkbox"/> Softball Camp #4
<input type="checkbox"/> Baseball Camp #5	<input type="checkbox"/> Soccer 9 v 9 League Boys	<input type="checkbox"/> Softball Camp #5

Baseball #3 and/or Softball #1, #2 practice time requested: \_\_\_\_\_

**Please sign and date:**

(Name) \_\_\_\_\_ has my permission to participate in the 2007-08 Sports Camp or League at CCBC Catonsville, The Community College of Baltimore County. I agree not to hold CCBC Catonsville liable for any injuries or damages resulting from participation in this program. I have read and understand the camp registration, refund, and weather policies and policies and information.

Please return with check payment to: Office of Camps, CCBC Catonsville, 800 South Rolling Road, Catonsville, Md. 21228.