

Adrian Peterson All Sports
Camp Registration Form

Child Name: _____ Shirt Size: _____
Child Information: Age: _____ Grade: _____ Date Of Birth: _____
Second Child Name: _____ Shirt Size: _____
Second Child Information: Age: _____ Grade: _____ Date Of Birth: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Parent or Guardian Name: _____ Email: _____
Emergency Contact: _____ Relationship: _____ Phone # _____
Emergency Contact: _____ Relationship: _____ Phone # _____

Parental Consent

I agree to allow my child to participant in the Adrian Peterson Football Camp. *Initials: _____ I agree to allow Adrian Peterson to take photos of my child at camp for promotion purposes. *Initials: _____ Release from Liability
I agree to assume all risk and hazards incidental to participation in the Adrian Peterson Football Camp. I do hereby waive, release, absolve, indemnify, and agree to hold harmless, the Adrian Peterson Football Camp, the staff, coaches and volunteers for any claim arising out of an injury to my child, whether the result of negligence or any other cause.

Parent/Guardian Signature
