



SMARTER



**Are you ready to get that couch potato
back into shape after the holidays?**

**Enroll in Kev's 1 day couch potato boot
camp!**

Walk Ins Welcome!



Date & Time: December 26th 10:00am – 3:00pm

Who: 5th-8th Grade Boys/Girls

Cost: \$75 includes Lunch

Where: Kingdom Sports Center 440 Watkins Glen Dr. Franklin, OH 45005 Phone: 937-746-3370

Register Online at: www.kingdomsportscenter.com

Player Name _____ **Age** _____ **Grade** _____ **Boy or Girl**

Parent Name(s) _____ **Food allergies?** _____

Cell # _____ **Email** _____

Parent/Guardian CONSENT/AUTHORIZATION

The undersigned, being a parent or legal guardian of the child requesting to participate in the Training Sessions do hereby affirm that the applicant is in good health and suffers from no illness, disability or condition that requires the taking of medication on a regular basis unless that condition is disclosed and approved and has no knowledge of any reason the applicant cannot participate in vigorous physical activity. The undersigned hereby expressly agrees to be responsible for any medical bills incurred in the treatment of any illness or accident and consents to allowing any of the training sessions supervisors to procure any medical treatment deemed advisable on behalf of the undersigned's child or ward without prior consent. I understand that no medical insurance I provided by this participation so the undersigned on behalf of the applicant hereby release the Kingdom Sports Center and or the noted Trainer any and all liability from injury or illness, mental or physical suffered by the applicant during or related to the Training Sessions.

Consent Agreed By Parent or Guardian Signature _____ **Date:** _____

For Office Use Only: Amount Pd. \$ _____ Amount Owed. \$ _____ Cash _____ Check # _____

VISA or MC _____ Exp. _____ Code # _____ Zip _____ Employee Initials _____ Date _____