



GAMES- GAMES- GAMES SUMMER 2011



DEPARTMENT OF
RECREATION AND PARKS

LUTHERVILLE-TIMONIUM RECREATION COUNCIL

Ages 5-12 -Boys & Girls

Four fun filled days playing your favorite games like capture the flag,
ultimate frisbee, table games, relays, and more!

- * Cardio Games * Lifetime Sports * Board Games * Party Activities
- Daily Contests

Each Camper will Receive

* 12 hours of games * Camp T-Shirt * Contests * Friday Pizza

CAMP INFORMATION

DATE/TIME: July 5-8, 2011
9 AM-12 NOON (Tues-Fri). Four days only

CAMP DIRECTOR: ROD NORRIS

LOCATION: SEMINARY PARK

COST: \$125.00

DISCOUNTS:

\$10 off additional family members in the same camp
\$10 off individual registrants in multiple sessions (lax, football, basketball camps)

QUESTIONS:

Call Rod Norris at 410-252-6867 for information or rnorris@bcps.org via e-mail.

2011 GAMES Camp MAIL IN -EARLY REGISTRATION FORM

\$40 deposit required at registration, balance due 1 week prior to camp. Make checks payable to: **LTRC**

MAIL TO: ROD NORRIS, 3 Thrush Court, Timonium, MD 21093

QUESTIONS? CALL 410-252-6867, rnorris@bcps.org

NAME: _____ AGE: _____

ADDRESS: _____ CITY: _____ ZIP: _____

PHONE: _____ BIRTH DATE: _____ SCHOOL: _____

T-shirt Size (Please circle one) YL 14-16 AS AM AL AXL

ACKNOWLEDGEMENT, WAIVER AND RELEASE OF LIABILITY: I HEREBY CONFIRM PARTICIPANT IS IN GOOD HEALTH AND ABLE TO PARTICIPATE IN THE ACTIVITY, I ACKNOWLEDGE THE ACTIVITY MAY INVOLVE RISKS AND DANGER OF BODILY INJURY OR DEATH. I FULLY ACCEPT AND ACKNOWLEDGE THE ACTIVITY MAY INVOLVE RISK AND I HEREBY ASSUME THE RISK AND RESPONSIBILITY FOR ALL DANGERS AND RISKS ASSOCIATED WITH PARTICIPATION IN THE ACTIVITY. I acknowledge Baltimore County, Maryland, the recreation council, and their respective employees, directors, officers, volunteers, members and any other participant, entity, party or person involved in any regard with the activity or the activity premises, and their respective agents, personal representatives, heirs, employees, contractors, successors and assigns (each an "Activity Representative" and collectively the "Activity Representatives"), SHALL NOT BE RESPONSIBLE OR LIABLE IN ANY REGARD OR MANNER FOR ANY AND ALL PROPERTY DAMAGE OR BODILY INJURY (INCLUDING SERIOUS PHYSICAL INJURY OR EVEN DEATH) INCURRED BY PARTICIPANT OR ANY PARTY RELATED THERETO AS A RESULT OF HIS/HER PARTICIPATION IN THE ACTIVITY.

I have read, fully understand and hereby freely sign, approve of, and agree to the terms of the registration form. I HEREBY UNCONDITIONALLY RELEASE, DISCHARGE, COVENANT NOT TO SUE, WAIVE MY RIGHTS AND REMEDIES, AND AGREE TO HOLD HARMLESS THE ACTIVITY REPRESENTATIVE from any and all claims costs, demands, losses, damages, or expenses associated with, in whole or in part, participants involvement with the activity. I certify all answers and information provided on the registration form are to the best of my knowledge true and correct throughout the activity. I shall inform the recreation council, in writing, if any of the information provided in the registration form is incorrect or changes during the course of the activity. I understand Baltimore County and/or the recreation council do not perform criminal and/or background checks on activity representatives. I shall present a government-issued photo identification card including, but not limited to, my driver's license, passport, or United States Visa to the activity representative for review, if requested, at the time I submit this registration form to the recreation council.

Signature of Parent or guardian _____ Date: _____

**The Baltimore Co. Dept. of Recreation and Parks does not provide background checks on volunteers. Should you require special accommodations (i.e. sign language interpreter, etc.) Please give as much notice as possible by calling the Rec. Office at 410-887-7684 or the Therapeutic Office at 410-887-5370 (voice), or 410-887-5319 (TT/Deaf).*

