



Joey Thomas

"Make It Happen"

Youth Sportsfest

Promoting Physical & Academic Fitness for Area Youth

June 19 & 20



*1.5 Mile Fun Run & Walk

*Football & Cheer Camp

*Charity Basketball Game:

NFL Pro's VS Local Joe's

Learn skills, strategies and techniques from the Pros.

To register, please fill out the form on the back.



Joey Thomas "Make It Happen" YouthSportsfest

1.5 Mile Walk & Fun Run

Kennedy High School

June 19 at 7pm

\$5 in advance/\$8 at event

Charity Basketball Game:

NFL Pro's VS Local Joe's

Kennedy High School

June 20 at 7 pm

\$5 in advance/\$8 at door

Free Football & Cheer Camp

Grades 1-8

Rainier Beach High School

June 20 at 9am

Register early! Space is limited: 150 football/50 cheer camp. Fill out this form and mail it to: Joey Thomas Foundation c/o Flying Color Sports, 8270 Miranda Pl West Chester OH 45069. **For payment:** make checks or money orders payable to the Joey Thomas Foundation. **Questions? Call 206-615-0520 or go to joeythomas.info**

CAMPER'S NAME

ADDRESS

CITY

STATE

EMAIL

AGE

HEIGHT

WEIGHT

SCHOOL

GRADE NEXT YR.

EMAIL

MEDICAL INS. CO.

HEALTH PROBLEMS?/MEDICATIONS?

Which event(s) will you attend?

- Walk/Fun Run*
- Football Camp
- Cheer Camp
- Charity Basketball Game*

***Please be sure to include payment**

Medical / Liability Release Agreement

I, the parent or legal guardian of the individuals listed on this form, certify that he/she has my full approval to participate in this activity. The individuals identified on this form understand that all participants are expected to abide by the activity rules. The director has the authority to require individuals to leave due to conduct and inappropriate behavior. As a result, no refund is required.

Further, I do release and hereby agree to hold blameless activity sponsor, and its employees and agents from any and every claim arising, or which may be asserted by me or by any member of my family by reason of participating in any activities associated with the activity. I also release the lessor of properties on which the activity is held.

Further, I do authorize the sponsor of this activity in the event I cannot be reached by phone, to give consent to a physician and/or hospital for emergency medical or surgical treatment. It is understood that I will assume any financial responsibility for any expense that may be incurred for said emergency treatment.

Further, I do certify that said individual is covered by adequate accident insurance. Further, I do authorize the activity sponsor to use my photographs and video footage shot at the activity for media and promotional purposes.

PARENT/GUARDIAN SIGNATURE

DATE