

Trooper Football Camp

Saturday, April 27th



circumstances, surrounding child's performance. I acknowledge that I have read and fully understand the foregoing.



Sponsored by

Parent/Guardian Signature

Do you ever wish you could play football like the Sioux Falls Storm? Now is YOUR chance! Play along with the Storm players and develop fundamental skills with proven drills and techniques.

Kids Ages: 5-15 Cost: \$25 Pre Registration or \$35 Day of (not guaranteed a tshirt)

Registration includes 1 ticket to that night's game against Arizona, additional are \$5 each

Camp Registration: 9:30AM Location: Sanford Premier Center **Camp Time: 10-11:30AM** Please remit payment and application to: Sioux Falls Storm Football 5901 S. Southeastern Ave. #104 Sioux Falls, SD 57108 Child's Name:_____ Age:_____ Parent/Guardian Name:_____ _____ Email:_____ Phone:______ Shirt Size_____ (Adult/Child) Additional Tickets \$_____Registration + \$_____ Extra \$5 Tickets= \$_____**Total Due** Cash: _____ Check: ____ CC: ____ Exp: ____ **I certify that my child is in good health. I hereby release and hold harmless the Denny Sanford Premier Center, Sioux Falls Storm and the IFL league and its member teams and their respective parents, subsidiaries, affiliates, directors, officers, governors, employees, and agents from and against any and all claims, causes of action, or demands relating to or arising out of a child's performance as a participant in the Trooper Camp. I expressly assume all risk of injury (including permanent disability and death) arising out of a child's performance, howsoever caused or arising and accept personal responsibility for the damages following such injury. I grant full permission to Denny Sanford Premier Center, Sioux Falls Storm, with no obligation to compensate me further, to use any photographs, videotapes, motion pictures, recordings, or other record of child's performance. I have full authority to execute this Consent Form and do so with full knowledge of the facts and

Date