

1002 Vine ST  
Cleveland, TX 77327  
405-474-1977

[tuffkids@gmail.com](mailto:tuffkids@gmail.com)  
[www.tuffkids.net](http://www.tuffkids.net)  
Facebook

## TUFF Kids

To develop and create physically active and healthy youth while inspiring academic excellence and personal development.

### Registration Form

We will be hosting a free four week summer camp that will primarily be held at Samuel Willey Park. All kids ages 7-18 are invited to attend Monday through Friday from 8:00-4:00. The kids will learn the fundamentals of different sports along with two hours of academic and personal development daily. The sports include but are not limited to the following: football, basketball, volleyball, and softball. Please complete the information below and return to Eisha Jones at 1002 Vine ST, Cleveland, TX 77327. If you have any questions you may contact her at 405-474-1977.

Parent Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

E:mail: \_\_\_\_\_

	Child Name	Nick Name	Date of Birth	Grade
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

Please list any health or special needs the children may have: \_\_\_\_\_

**Trained Unwavering Focused & Fit**

## Authorizations

Parent/Legal Guardian: \_\_\_\_\_

Children:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Do you have Personal or Group Insurance? Yes \_\_\_ No \_\_\_

Name of insurance company: \_\_\_\_\_

Insurance card holder: \_\_\_\_\_

Member ID: \_\_\_\_\_

I, the parent/legal guardian of the above children, in the event of my absence, do hereby give my permission to TUFF Kids, it's agents and directors to authorize any medical attention required in the event my child is injured

I, the parent/legal guardian of the above child, hereby give permission for him/her to participate in any and all activities during the current season. I assume all risks of hazards incidental to such activities. I hereby release, waive, and hold harmless TUFF Kids, it's respective organizers, directors, coaches, and volunteers from claims arising out of any injury or damages incurred during or in route to such activities.

I authorize my child(ren) to be transported from Samuel Wiley Park to secondary locations being utilized by TUFF Kids.

I authorize my child(ren) image and likeness to be used in the promotion of the organization.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Trained Unwavering Focused & Fit**