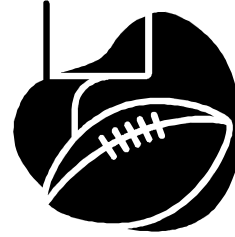


**PITT COUNTY COMMUNITY SCHOOLS & RECREATION
FLAG FOOTBALL CAMP 2008**

Location: Wintergreen Intermediate
Time: 9:00 am – 12:00 noon
Dates: August 4 – August 8 (Ages 7-12)
Fee: \$25.00
Deadline: July 24, 2008



Please complete a registration form and along with your fee submit to:
PCCSR Flag Football Camp
4561 County Home Rd, Greenville NC 27858

Name _____ Home Phone _____ Cell _____

Address _____ Zip _____

Age _____ Grade _____ School _____ E-mail address: _____
rising into

| |
|--|
| Mother: _____ Phone # _____ |
| Father: _____ Phone # _____ |
| Emergency Contact _____ Phone # _____ |
| Doctor's Name: _____ Phone # _____ |

**PITT COUNTY COMMUNITY SCHOOLS & RECREATION
PARENT CONSENT FORM**

I hereby give my son/daughter _____ permission to participate in the Pitt County Community Schools & Recreation Flag Football Camp. While I realize that all precautions will be taken to safeguard my child from injury, I will not hold the Pitt County Board of Education, the Community Schools & Recreation Program, or program staff responsible for any accidents that may occur.

Signature of Parent or Guardian

Date

| | |
|---|---------------|
| Occasionally we may take photographs of the children in our program. We may use these images in printed publications or on our website. We will not release any personal details or names in our publications or website. | |
| I hereby <u> </u> GIVE <u> </u> DO NOT GIVE my consent for my child _____ to be photographed for the reasons stated above. | |
| _____ Signature of Parent or Guardian | _____ Date |