

**Please print and sign this form, return with your payment**

**Cancellation Policy**

Written notice of cancellation must be received at least two weeks prior to the start date in order to qualify for refund. Refund is limited to sixty percent of tuition. No refund or credit is available for individual days absent or canceled due to weather. If the entire week of the Academy is canceled, credit for the following year's tuition will be given.

**Jeremy Beardsley Soccer Academy  
Guardian Consent and Waiver**

I, the undersigned, hereby certify that I am the parent or legal guardian of the camper. I hereby give permission for the staff of the camp to seek, during the period of the camp, appropriate medical attention for the camper and for medical attention to be given and for the camper to receive medical attention in the event of an accident, injury, or illness. I will be responsible for all costs of medical attention and treatment. I understand that soccer is a physical sport and that injuries can be a consequence of participation in this activity and no amount of reasonable supervision or use of facility will prevent injury. I have carefully considered how the possible consequence of injury may impact my child's life, and I choose to accept this risk and allow him/her to participate in the designated activity. I also understand that there will be a number of children attending camp, and there will be a limited number of head coaches and assistant coaches, and that our child cannot receive individualized attention and supervision all the time. I certify that my child(ren) is/are in excellent physical health and mentally capable of participating in soccer and camp activities. In accepting the aforesaid risk, I expressly and explicitly release, waive, and forever discharge any and all responsibility of the Jeremy Beardsley Soccer Academy, its staff, employees, officials, agents, and representatives of any and all of the foregoing, pursuant to, or pertaining or relating to, or arising from, in any manner, injuries to my child as a result of his/her participation in these activities. I, the undersigned, hereby certify and give permission to the Jeremy Beardsley Soccer Academy to use any group or individual pictures taken during the week to be used for promotional purposes.

\_\_\_\_\_  
Camper's Name (please print)

\_\_\_\_\_  
Please Print Parent or Guardian name

By my signature below, I certify that I completely understand this document.

\_\_\_\_\_  
Signature of Parent or Guardian Date

Please sign and return with the appropriate camp registration fee:  
\$310 before May 1<sup>st</sup> and \$335 after to:

**Jeremy Beardsley Soccer Academy  
PO BOX 231  
Skillman, NJ 08558**