



ZETA FENCING

11 SOUTH MAIN STREET · NATICK, MASSACHUSETTS 01760
508.655.6480 · ZETA FENCING.COM

REGISTRATION FORM – SABRE CLINIC WINTER 2017

PLEASE PRINT CLEARLY

First Name	Last Name
Address	
City	State/Zip
Phone 1 (emergency contact)	Phone 2 (emergency contact)
Mother's Name	Father's Name
Email	DOB
Please list any medical conditions that we should be aware of (allergies, disabilities, etc.).	

SCHEDULE & FEES

- SCHEDULE:** TUESDAY, DECEMBER 26 – FRIDAY, DECEMBER 29: 10AM-3PM INTENSIVE FENCING CLINIC (LUNCH BREAK 12-1PM)
SATURDAY, DECEMBER 30: 10AM-3PM WARMUP AND REVIEW, FENCING TOURNAMENT
- CONTENTS:** CONDITIONING AND FOOTWORK, FENCING DRILLS WITH DAILY FOCUS, OBSERVED PRACTICE BOUTS, VIDEO ANALYSIS, FENCING STRATEGY AND PSYCHOLOGY, COMPETITION PREPARATION, LAST DAY TOURNAMENT TO TEST NEW SKILLS
- TO BRING:** COMPLETE FENCING EQUIPMENT (CAN BE LEFT AT CLUB OVERNIGHT), LUNCH OR LUNCH MONEY, WATER BOTTLE
- COST:**
- REGULAR REGISTRATION: MEMBERS \$450 / NON-MEMBERS \$500
 - EARLY BIRD SPECIAL (REGISTRATION AND PAYMENT RECEIVED ON OR BEFORE DECEMBER 12, 2017): MEMBERS \$400 / NON-MEMBERS \$450
 - SINGLE-DAY FEE: MEMBERS \$100 / NON-MEMBERS \$125 (MARK DATE(S) OF ATTENDANCE: TUE,12/26 WED,12/27 THU,12/28 FRI,12/29 SAT,12/30)

WAIVER OF LIABILITY

Initial	I UNDERSTAND THAT PARTICIPATION IN ANY SPORT CARRIES A RISK OF SERIOUS INJURY. I KNOWINGLY ACCEPT AND ASSUME THIS RISK AND RELEASE ZETA FENCING, ITS SPONSORS, INSTRUCTORS AND OFFICERS OF ANY LIABILITY.
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CONSENT FOR MEDICAL TREATMENT

Initial	I GIVE MY CONSENT TO THE STAFF AND COACHES OF ZETA FENCING TO OBTAIN MEDICAL CARE FROM ANY LICENSED PHYSICIAN, HOSPITAL OR CLINIC FOR ANY INJURY OR ILLNESS THAT MAY ARISE DURING ACTIVITIES ASSOCIATED WITH THE ZETA FENCING.
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POLICIES & PRIVACY STATEMENT

I CONFIRM THAT I AM / MY CHILD IS A CURRENT COMPETITIVE MEMBER OF USA FENCING. FULL PAYMENT IS REQUIRED WITH REGISTRATION.

CANCELLATION POLICY: BEFORE DECEMBER 15TH, REFUND OF COSTS AFTER DEDUCTION OF \$50 ADMINISTRATION FEE
AFTER DECEMBER 15TH, NO REFUND

- I give permission for my/my child's photo to be used for promotional purposes for Zeta Fencing. I do not give permission.

Signature	Date
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A PARENT OR GUARDIAN MUST SIGN FOR STUDENTS UNDER THE AGE OF 18.

APPLICATIONS ARE ACCEPTED IN THE ORDER IN WHICH THEY ARE RECEIVED.