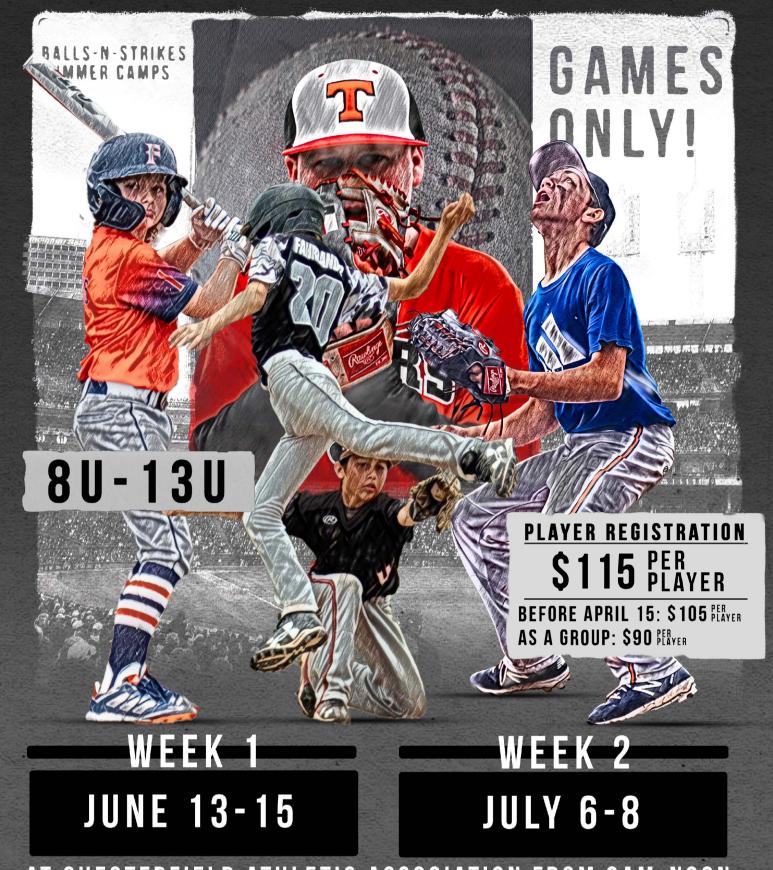


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I herebyauthorizethe d	uardian Name & Sig director of the Balls-n-Strikes camp to act for me acci ble for any medical or any other charges in connect	ording to his/her best judgment in an emergen	cy requiring medical attention. I know of no mental or physical proble e by the rules and regulations of the camp	ens which might affect my child's ability to safely pa	3)	
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