

YOUTH SPORTS REGISTRATION FORM

SPORT _____

NAME _____ GRADE _____ SIBLINGS IN AGE GROUP _____

DATE OF BIRTH _____ AGE _____ SCHOOL _____ MALE/FEMALE _____

MAILING ADDRESS _____ EMAIL _____

PARENT(S) OR GUARDIAN _____

HOME PHONE # _____ CELL PHONE # _____

LAST YEARS TEAM NAME/COACH _____

MEDICAL INFO: Please list any special needs, physical limitations, allergies, or medications your child's coach would need to know about _____

We need volunteers and sponsors. Please circle if you would be interested in one:

1. COACH 2. ASSISTANT COACH 3. REFEREE/UMPIRE 4. TEAM SPONSOR (\$100)

SHIRT SIZE (Please Circle One) **YOUTH** S M L **ADULT** S M L XL

NOTE: FEE MUST ACCOMPANY YOUTH SPORTS SIGN-UP FORM.

WAIVER: In order to participate in said program as parent or guardian for said participant, I assume the risk of any and all injuries to participant or by the participant. I hereby agree to indemnify and hold harmless the City of Martinsville Parks & Recreation, its successors, assigns, and the Martinsville City Council from any and all claims for any and all injuries suffered or caused by said participant due to participation in said activity. It is likewise assumed that said participant will wear the proper clothing and protective equipment during said program and that it is the responsibility of the parent or guardian to make sure this criteria is met. I grant my permission to transport said participant to and from said event when required and hold harmless those assigned to transport. I also agree to allow transportation of said participant to the nearest physician or hospital for medical treatment, and agree to allow for immediate first aid to the injured said participant when deemed necessary. I grant my permission for my child to be photographed for promotional purposes by Martinsville Parks & Recreation.

**I HAVE READ AND FULLY UNDERSTAND ALL OF THE INFORMATION INCLUDED IN THE ABOVE
NOTICE AND WAIVER.**

PARENT/GUARDIAN SIGNATURE _____ DATE _____

PLEASE TAKE THIS FORM TO THE TREASURER'S OFFICE

TO PAY:

55 W. Church ST, Suite 104 Martinsville, VA 24114

KEY: LEISUR AMOUNT: \$10.00 METHOD: _____