

TOWN OF PLATTSBURGH - REGISTRATION FORM

REGISTRATION DEADLINES

Baseball/Softball/T-Ball is April 15th, 2010

Fall Soccer July 23rd, 2010



PARENT/GUARDIAN INFORMATION

Name of Adult: _____

Day Phone: _____ Evening Phone: _____

Address: _____

EMERGENCY CONTACT INFORMATION:

Name: _____ Phone: _____

Youth Commission Area:
 Cadyville
 Cumberland Head
 Cliff Haven

 East Morrisonville
 North Plattsburgh
 South Plattsburgh

PARTICIPANT ONE				PARTICIPANT TWO			
Full Name	Age	D.O.B	Grade	Full Name	Age	D.O.B	Grade
_____	_____	_____	_____	_____	_____	_____	_____
<input type="checkbox"/> Baseball/Softball/T-ball <input type="checkbox"/> Swimming <input type="checkbox"/> Fall Soccer				<input type="checkbox"/> Baseball/Softball/T-ball <input type="checkbox"/> Swimming <input type="checkbox"/> Fall Soccer			

Do any of the participants have special needs? Yes ___ No ___

If yes, please explain _____

Do any of the participants have allergies? Yes ___ No ___

If yes, please explain _____

Would a parent/guardian be interesting in coaching? Yes ___ No ___

Assisting? Yes ___ No ___ Sport/Activity: _____

Turn Over For Parental Consent Form and Return



WAIVER AND RELEASE OF LIABILITY

DISCLAIMER: TOWN OF PLATTSBURGH SHALL NOT BE RESPONSIBLE FOR ANY INJURY (OR LOSS OF PROPERTY) TO ANY PERSON SUFFERED WHILE PLAYING, PRACTICING, OR IN ANY OTHER WAY INVOLVED IN THE TOWN PROGRAM FOR ANY REASON WHATSOEVER, INCLUDING ORDINARY NEGLIGENCE ON THE PART OF TOWN OF PLATTSBURGH, ITS AGENTS, OR EMPLOYEES.

In consideration of my child's participation, I hereby release and covenant not-to-sue Town of Plattsburgh, Town Board of the Town of Plattsburgh and any of their employees, instructors, or agents, from any and all present and future claims resulting from ordinary negligence on the part of the Town or others for property damage, personal injury, arising as a result of my child's engaging in or receiving instruction in Town activities or any activities incidental thereto, wherever, whenever, or however the same may occur. I hereby voluntarily waive any and all claims resulting from ordinary negligence, both present and future, that may be made by me, my child, or assigns.

Further, I understand that these programs involve certain risks, including but not limited to, neck and spinal injuries, injury to virtually all bones, joints, muscles, and internal organs, and that equipment provided for my child's protection may be inadequate to prevent serious injury. I am allowing my child to voluntarily participate in this activity with knowledge of the danger involved and hereby agree to accept any and all inherent risks of property damage, or personal injury. In addition, I understand I may not always be there and in the event of an emergency, I hereby give permission for my child to be given emergency first aid treatment and or to be examined and treated at the nearest medical facility.

I further agree to indemnify and hold harmless Town of Plattsburgh and others listed for any and all claims arising as a result of my child's engaging in or receiving instruction in Town activities or any activities incidental thereto, wherever, whenever, or however the same may occur.

I understand that this waiver is intended to be as broad and inclusive as permitted by the laws of New York and agree that if any portion is held invalid, the remainder of the waiver will continue in full legal force and effect. I further agree that the venue for any legal proceedings shall be in New York.

I affirm that I am of legal age, the child's legal guardian and am freely signing this agreement. I have read this form and fully understand that by signing this form, I am giving up legal rights and/or remedies which may be available to me for the ordinary negligence of the Town of Plattsburgh or any of the parties listed above.

Signature of Parent/Guardian

Date