



# REGISTRATION FORM

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Apt \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

Ethnicity  African American  Asian American  Caucasian  Hispanic   
Other \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Address \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email Address: \_\_\_\_\_ Child T-shirt Size: \_\_\_\_\_

If you regularly attend church, please list the name \_\_\_\_\_

What is your skill level?  Beginner  Intermediate  Competitive

In case of emergency and parent/guardian cannot be reached:

Contact Person \_\_\_\_\_ Emergency Phone Number \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Address \_\_\_\_\_

List any medical conditions your child may have and/or medical information that might be helpful:

Allergies/other \_\_\_\_\_

Insurance (Company & Policy Number) \_\_\_\_\_

*Facilities, programs and services sponsored by Emerald Youth Sports are available to all eligible persons regardless of race, color, sex, religion, disability, or national origin and involve faith (Christian) development activities.*

## REGISTRATION INFORMATION *Please Read Carefully*

Do we have permission to use your child's name/picture for publicity news releases?  YES  NO

Do we have permission to transport your child in Emerald Youth Vehicles?  YES  NO

In case of emergency, does your child have permission to ride to and from the event in Emerald Youth vehicles or staff members' personal vehicles?  YES  NO

I grant permission for the child named on this application to participate in the aforementioned activities and programs. I understand that activities with Emerald Youth Foundation are potentially hazardous and I assert that my child is medically and physically able to withstand the rigors of such activities. I will not hold Emerald Youth Foundation liable for anything that happens in any and all risks associated with the activity, including but not limited to: accidents, the effects of weather, and all acts of the participants or the acts of third parties not under the control of Emerald Youth Foundation. In case of emergency, I grant permission to the leader of this group to seek such assistance as he/she deems necessary.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_