STONEVILLE RECREATION SPORTS REGISTRATION FORM

Sport:	•					
Activity:						
First Name:		Last	Name:			
Date of Birth:	Age:		Grade:	Gene	der:	
Address:						
Circle T-Shirt Size: Youth -						
Adult – A/S A/M A/L A/X	L A/2	XL A	/3XL		*	
Days You Cannot Practice:						
Parent/Guardian #1 (person v changes or cancellations.)					ergency, pract	tice, game
Name:	Annyah malamakan ya ya ya da ya ka ka	Ph	one Number	r: _		
Email:						a)
Parent/Guardian #2						
Name:		_ Phon	e Number:_			
Email:						
Coaches Information				-	**	
Name:		Pho	one Numb	er:		
Email:						
Assistant Coach Information						
Name:			Phone Num	ıber:		
Email:						
Coach T-shirt Size: A/S A/I						
Circle One: Soccer Youth\$40 Youth\$40.00 T-Ball /Coach Pitch\$2 Softball/Baseball Uniform Fee\$30.00 A Player Adult Volleyball\$65.00 Per Te	10.00 T Adult Sc	-Ball Coa ftball\$	ach Pitch Uniforr 65 00 Per Team	n Fee\$30.00 S	oftball/Baseball Yo	uth \$40.00

\$5.00 Discount for multiple children in the same family.

Make Checks Payable to: Town of Stoneville (No Refunds)

The Town of Stoneville is an Equal Opportunity Employer.

WEBSITE: WWW.STONEVILLENC.ORG

Release and Waiver of Liability

The Release

You are individually and/or on behalf of any minor child release the Town of Stoneville, its officers, directors, board members, council members, employees, volunteers, independent contractors, other participants and/or others acting on behalf of the Stoneville Recreation Department. You agree that this release is effective immediately. This is important to you and/or any minor children, so do not sign until you have read and understand the Release and have any questions regarding the Release answered. You provide this Release freely and without duress under the following terms.

1. General Release

I hereby agree for myself and/or my child and our respective heirs and legal representatives to indemnify, defend and hold Stoneville Recreation Department and its officers, directors, councilmen, employees, volunteers, agents, independent contractors and other participants in the program harmless from any and all claims and cause of action of any nature for any and all personal injury or illness, including death which may occur to me and/or my child or which may be aggravated during any activity during the course of the program in which I have decided to allow myself and/or my child to be involved. I further waive all claims or causes of action, which I or my child may now or hereafter have against Releases, which may at any time arise because of any act or thing occurring in or arising out of, and/or my child's participation in an event and/or activity. I further expressly understand and agree the foregoing indemnity, release and waiver intended to be as broad and inclusive as permitted by laws of the State of North Carolina and that any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding continue in full force and effect.

2. Assumption of Risk

I individually and/or on behalf of any minor child, expressly and specifically assume all risk of injury, illness, death, or property damage resulting from any Stoneville Recreation Department activities. (You assume the Risk) I individually and on behalf of my minor child understand that Recreation Activities are strenuous and dangerous and should be engaged in only by people in good health. I understand that I should consult a physician before enrolling myself and/or my child in programs and/or activities offered and/or sponsored by the Stoneville Recreation Department. Once you sign, you are stating that you understand the risk involved and except all risks.

3. Medical Release

I individually and/or on behalf of my minor child, further hereby release the Stoneville Recreation Department from any claim whatsoever which may arise as a result of any first aid treatment, service or assistance provided to me in connection with injury or injuries that arise from participating in any activity or event sponsored by the Stoneville Recreation Department. I will take full responsibility for me and my minor child's welfare and safety while at events and/or activities sponsored by the Stoneville Recreation Department. I hereby give permission for emergency medical treatment to be administered as deemed appropriate to myself and/or my minor child while participating or attending an activity or even sponsored by the Stoneville Recreation Department.

4. Insurance

You are expected to have your own health insurance. You should understand that the Stoneville Recreation Department does not carry insurance to cover injuries and/or losses that may befall you.

5. Photographic Release

I consent to be photographed and allow the Stoneville Recreation Department to use any photos of myself or my minor child at the sole discretion of the Stoneville Recreation Department.

6. Parents Code of Ethics

I agree to act in an appropriate manner and be supportive of all players, coaches, and officials. I will always be respectful. I will not use profanity or make negative comments to players, coaches, officials and/or parents. I will address any issues I have with the Recreation Director or his/her designee. I understand that if I fail to conduct myself in an appropriate manner, I will not have the privilege of participating in and/or attending Stoneville Recreation Events and/or Activities.

7.	Having read, understood, and agreed	with	these terr	ms, I have ex	ecuted	this Rel	ease
	to be effective immediately.	w					
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Parent/Guardian Signature:	Date:	CHARLE RELATED STORY TOWN THREE TOTOGRAM AND STEEL WHICH WAS