

SOCCER / REGISTRATION FORM - FAMILY INFORMATION (HEAD OF HOUSEHOLD/GUARDIAN)						OFFICE USE ONLY
LAST		FIRST		MI		DATE
ADDRESS (PO Boxes not accepted)					Apt #	
CITY			STATE		ZIP	
HOME PHONE -		WORK PHONE -		EMAIL		
EMERGENCY CONTACT				EMERGENCY PHONE		
INITIALS						
FACILITY						

**PARTICIPANT INFORMATION (SIGN-UP ALL MEMBERS FROM THE SAME FAMILY ON THIS FORM)**

[ Program/ Class. # ]	PARTICIPANT NAME		BIRTHDATE			GENDER	ACTIVITY NAME	ACTIVITY FEES
	LAST	FIRST	MO	DAY	YEAR			

Does your son\daughter play travel soccer during the 2008 season? Yes ___ No ___ I would like to play for the following organization/team: (Please list in order of preference)	A) B) C)
---	----------------

I want to play on the following day of the week: (Please be as flexible as possible and list in order of preference)	A) B) C)
---	----------------

<p style="text-align: center;"><b>ASSUMPTION OF RISK &amp; RELEASE FORM</b></p> <p>The undersigned person requests and is granted permission to participate in classes, activities programs and/or events sponsored by the Town of Tonawanda ("Town") whether occurring on its premises or elsewhere. In consideration of participation in any such class, activity, program or event, the undersigned, his/her personal representatives, heirs and/or assigns, DOES HEREBY:</p> <ol style="list-style-type: none"> <li><b>RELEASE, DISCHARGE AND COVENANT NOT TO SUE</b> the Town, its Board, Officers, Employees and/or Agents from any and all claims for personal injury or property damage, except those resulting from the Town's negligence, arising out of participation in any such class, activity, program or event, and further agrees to hold harmless the Town from any claims, judgments or expenses the undersigned may incur by participation in the described activity.</li> <li><b>UNDERSTAND</b> that participation in the described activity involves danger and risk of injury. The inherent danger is understood and voluntarily assumed.</li> <li><b>ACKNOWLEDGE</b> that the undersigned is aware of equipment and safety regulations and will comply with each regulation ASSUMING ALL RISK for himself/herself and all liability to others for failure to do so. No oral representations or inducements have been made prior to signing this agreement. If any portion of this agreement is held invalid, it is agreed that the balance thereof shall continue in full legal force and effect.</li> </ol> <p><b>I HAVE READ THIS DOCUMENT AND UNDERSTAND THAT IT IS A RELEASE OF CLAIMS ON THE CONDITIONS SET FORTH ABOVE. I UNDERSTAND AND ASSUME ALL RISKS INHERENT IN THIS ACTIVITY ON BEHALF OF MYSELF OR IN MY CAPACITY AS LEGAL GUARDIAN FOR THE PARTICIPANT BELOW.</b></p> <p>Name of participant: (Please Print) _____ Date: _____</p> <p>Signature of participant or legal guardian (if applicable) _____</p>	<p>TOTAL \$ FEES _____</p> <p>AMOUNT \$ ENCLOSED _____</p> <div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;"><b>FORM OF PAYMENT</b></p> <p style="text-align: center; margin: 0;"><b>ALL FACILITIES</b></p> <p><input type="checkbox"/> CASH</p> <p><input type="checkbox"/> CHECK</p> <p><input type="checkbox"/> MONEY ORDER</p> <p><input type="checkbox"/> TOT DEBIT CARD</p> <p style="text-align: center; margin: 0;"><b>AFC, YPR OFFICE &amp; GOLF DOME ONLY</b></p> <p><input type="checkbox"/> VISA</p> <p><input type="checkbox"/> MASTERCARD</p> </div>
---	---

**THIS WAIVER MUST BE SIGNED ON BOTH SIDES OR FORM WILL NOT BE PROCESSED**