

VILLAGE OF KEY BISCAYNE

UNIVERSAL YOUTH SPORTS REGISTRATION FORM

Please complete the following information, one application per child:

SPORT: _____ **YEAR** _____

Registration Fee: \$ _____ Payment: () In Full () Installment () Financial Aid Applicant

Participant Name: _____ Birth date: _____

Street _____ City _____ State _____ Zip _____

Father's Name: _____ Phone #: _____ Email: _____

Mother's Name: _____ Phone #: _____ Email: _____

Participant lives with: () Both Parents () Mother () Father () Other _____

Would you be willing to serve as a Volunteer: () Head Coach () Asst. Coach () Team Parent () KBAC member

GENERAL RELEASE & ACKNOWLEDGEMENTS

In consideration of permission granted to my child by the Key Biscayne Parks & Recreation Department to participate in the sport program listed above, I hereby release and discharge the Village of Key Biscayne, the Key Biscayne Parks & Recreation Department, its agents, employees, and/ or officers of the Village of Key Biscayne and/ or Key Biscayne Parks & Recreation Department, from all claims, demands, actions, judgments and executions which the undersigned ever had, or now has, or may have, or which the undersigned's heirs, executors, or assigns may have, or claim to have, against the Village of Key Biscayne, Key Biscayne Parks & Recreation Department, and/ or their agents, employees, officers, and/ or its successors or assigns, for all personal injuries, known or unknown, and injuries to property, real or personal, caused by or arising out of, the described activity. I further agree to indemnify and hold harmless the Village of Key Biscayne, the Key Biscayne Parks & Recreation Department, its agents, employees, and/ or officers of the Village of Key Biscayne and/ or Key Biscayne Parks & Recreation Department, from all claims, demands, actions, judgments and executions caused by the undersigned or the undersigned's child arising out of the described activity. I agree to return, upon request, the uniform and any other equipment issued.

I hereby request permission for my child to participate in the above described activity with full knowledge that this activity could result in damage or injury to my child. I, the undersigned, have read this release and understand all of its terms. I execute it voluntarily and with full knowledge of its significance.

I understand that this sports program will be administered according the Standardized Athletics Policies & Procedures ("SAPP") established by the Village of Key Biscayne.

I have received the Key Biscayne Parks & Recreation Department's Parents and Players Code of Conduct and will abide by the Code. I acknowledge that I may face disciplinary action from the Disciplinary Committee for any violation of the Parent and Players Code of Conduct.

Parent/Guardian Signature

Date

PLEASE VISIT THE YOUTH ATHLETICS WEBSITE AT www.activeislander.org for more information.