

Lisbon Town Rec 2021 Fall Basketball Registration Form

WEB: www.lisbonrec.wixsite.com FACEBOOK: Lisbon Town Recreation

Registration forms must be received by Sept 28th

ONE registration form is required per child

Please make checks payable to Town of Lisbon

Return Forms to Lisbon Town Clerk

6963 Co Rt 10

Lisbon, NY 13658

Grades 3-6 Only \$15.00/player Or \$25 per Family

1. Player's Name: _____ Age: ____ Date of Birth: _____ Male/Female (circle) Grade _____

Parent Contact Name: _____ Parent Contact #: _____

Address: _____

Parent email Address: _____

Allergies or Medical

Conditions: _____

PERMISSION SLIP

Permission Slip and Release Form

I the undersigned grant permission for my child to participate in sports, activities programs and/or events sponsored by the Town of Lisbon ("Town") whether occurring on its premises or elsewhere. In consideration of participation in any such sport, activity, program or event, the undersigned, his/her personal representatives, heirs and/or assigns, executors and administrators agree to be legally bound to the terms and conditions hereinafter set forth; I hereby give our consent and approval for the participation of the applicant in the program conducted by the Town of Lisbon and do hereby:

1. RELEASE, DISCHARGE AND COVENANT NOT TO SUE the Town, its Board, Officers, Employees, Volunteers, 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 sport, activity, program or event, and further agree to hold harmless the Town from any claims, judgments or expenses the undersigned may incur by participation in the described activity.

2. UNDERSTAND that participation in the described activity or sport involves danger and risk of injury. The inherent danger is understood and voluntarily assumed.

3 ACKNOWLEDGE 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.

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 MY CHILD OR IN MY CAPACITY AS PARENT AND/OR LEGAL GUARDIAN FOR THE PARTICIPANT ABOVE.

Signed: _____ Date: _____

Are you interested in: coaching _____ assistant coach: _____

(Authorized personnel only) Payment Received: Cash: _____ Check # _____