

Youth Soccer



AGREEMENT TO PARTICIPATE

I, the undersigned parent or legal guardian, understand the inherent hazards and risks of personal and emotional injury or bodily harm possible to myself, my spouse and/or my children that are involved with organized sports, classes or programs. I agree to inform my child of such risks. Knowing this, I hereby give my consent for my child to participate in Tremontion Parks and Recreation sponsored programs. I take full responsibility in his/her actions and agree to release, indemnify and hold Tremontion City Corporation, its employees, sponsors and volunteers from any liability, loss, cost or expense (including attorney and medical fees.) I authorize the Recreation Dept. to use my fees at their discretion. I give my consent for my families photograph to be taken, used and published.

Signed: _____ **Date:** _____

Member Information

If your contact information has changed PLEASE let us know
(Please print)

Parent Name: _____ **Do you live in the city limits?** Yes No

Phone Number: _____ ****Are you interested in coaching?** Yes No Maybe

Address: _____

Child #1 _____ **Age:** _____ **Boy or Girl** _____ **Grade** _____ **School** _____

Child #2 _____ **Age:** _____ **Boy or Girl** _____ **Grade** _____ **School** _____

Child #3 _____ **Age:** _____ **Boy or Girl** _____ **Grade** _____ **School** _____

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