

# YMCA/Members Registration Form

(Fill out completely – please PRINT)

## Players on Team

\_\_\_\_\_ D.O.B. \_\_\_\_\_ Age \_\_\_\_\_  
\_\_\_\_\_ D.O.B. \_\_\_\_\_ Age \_\_\_\_\_  
\_\_\_\_\_ D.O.B. \_\_\_\_\_ Age \_\_\_\_\_

Parent or Guardian of Team \_\_\_\_\_

Address of Team \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Team Name \_\_\_\_\_

Email Address \_\_\_\_\_

## PARTICIPATION & PUBLICITY RELEASE

The Members (YMCA, TCTCPA, Christ Lutheran, Donors or any sponsors), of this tournament will not assume responsibility for any injury incurred while participating in any athletic events, childcare programs, parent/child & outings, special events, sports programs or any related Member sponsored activities. Certain risks of injury are inherent during participation in these programs and events. Nor will the Members be responsible for any lost or stolen items while members and/or program participants are using Members facilities, on Members premises or off-site Members program locations. I understand for myself and my heirs, do hereby release the Members and its employees and agents from any and all claims for injury, loss or damage I may suffer as a result of my participation, including any injury caused by the negligence, if any, of the Members, its officers, employees, agents, volunteers or the negligence of anyone else. I give my permission to the Members to use photographs, film footage, or tape recordings, which may include my image or voice for purposes of promoting or interpreting Members programs for no compensation.

Parent/Legal Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent/Legal Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent/Legal Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_