

Town of Jay / Black Brook

2008 BASEBALL / SOFTBALL Registration

**PLEASE RETURN FORMS TO THE TOWN OF JAY OFFICES BY
or DROP OFF AT SCHEDULED SIGN-UPS.**

Grasshopper

Pee Wee

Pony

| | |
|---|--|
| CHILD'S NAME _____ | (Please circle one) MALE FEMALE |
| DATE OF BIRTH _____ | Age as of July 31, 2008 _____ |
| STREET ADDRESS _____ (no PO Box) | |
| MAILING ADDRESS _____ (PO Box OK here) | |
| PHONE # _____ | CELL # _____ |
| E-MAIL ADDRESS _____ (to receive information re: important dates, activities, events, reminders, Youth Commission information etc.) | |
| MEDICAL CONCERNS _____ | |
| EMERGENCY CONTACT NAME _____ | PHONE _____ |
| Emergency contact relationship to child _____ | |

Waiver and Release of Liability:

Disclaimer: Town of Jay / Black Brook shall not be responsible for any injury (or loss of property) to any person suffered while playing, practicing, or in any other way involved in the town program for any reason whatsoever, including ordinary negligence on the part of Town of Jay / Black Brook, their Agents, or Employees.

In consideration of my child's participation, I hereby release (and covenant not-to-sue) Town of Jay / Black Brook, Town Board of the Town of Jay / Black Brook and any of their employees, instructors, or agents, from any and all present and future claims resulting from ordinary negligence on the part of the Town or others for property damage, personal injury arising as a result of my child's engaging in or receiving instruction in Town activities, incidental thereto, whatever, whenever, or negligence, both present and future, that may be made by me, my child, or assigns.

Further, I understand that these programs involve certain risks, including but not limited to, neck and spinal injuries, injuries to virtually all bones, joints, muscles and internal organs, and that equipment provided for my child's protection may be inadequate to prevent serious injury. I am allowing my child to voluntarily participate in this activity with the knowledge of the danger involved and hereby agree to accept any and all inherent risks of property damage or personal injury. In addition, I understand I may not always be there and in the event of an emergency, I hereby give permission for my child to be given emergency first aid treatment and / or be examined and treated at the nearest medical facility.

I understand that this waiver is intended to be broad and inclusive as permitted by the laws of New York State and agree that if any portion of this is held invalid, the remainder of the waiver will continue in full legal force and effect. I further agree that the venue for any legal proceedings shall be in New York State. I affirm that I am of legal age, the child's guardian and am freely signing this agreement. I have read this form and fully understand that by signing this form, I am giving up legal rights and / or remedies which may be available to me for the ordinary negligence of the Town of Jay / Black Brook or any parties listed above.

Legal Guardian Signature _____ **Date** _____