**Town of Jay & Black Brook 2022 Youth Commission**

**Soccer Sign-Ups**

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| **Child’s Information** |
| **Child’s Name:** | **Age:** |
| **Date of Birth:** | **Male Female** |
| **Parent/Guardian’s Name:** |
| **Street Address:** |
| **City:** | **State:** | **Zip:** |
| **Mailing Address:** |
| **City:** | **State:** | **Zip:** |
| **Home Phone: ( ) -** | **Cell Phone: ( ) -** |
| **E-Mail:** |
| **Medical Concerns:**  |
| **Emergency Contact:** | **Relationship to Child:** |
| **Home Phone: ( ) -** | **Cell Phone: ( ) -** |

**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 Jay/Black Brook an 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 other for property damage, personal injury arising as a result of my child’s engaging in or receiving instruction in town activities, incidental there to, 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 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’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:­­­­­­­­­ ­­­­** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

The Jay/Black Brook Youth Commission is always looking for help to make our programs successful. Would you be willing to volunteer to:

(Coach a Team: Yes No) (Help with concessions: Yes No)

Your child’s **birth certificate** must be presented at the time of sign-ups. If dropping off to a designated location please make sure a copy of their birth certificate is attached. **The ONLY request to be accepted for the division of the students is to keep siblings together.** If you have any questions please call Amanda Whisher at (518)-420-2410 or email her at amanda.whisher@icloud.com. Please return sign-up by **July 15th, 2022** the Town of Jay or Black Brook offices. Thank you!

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| Age Group Classifications | Born on or After | Born on or Before |
| Mini Mites | Ages 4 & 5 | 11/1/16 | 10/31/18 |
| Mites | Ages 6 & 7 | 11/1/14 | 10/31/16 |
| Pee Wee | Ages 8, 9, 10 | 11/1/11 | 10/31/14 |
| Bantam | Ages 11, 12, 13 | 11/1/08 | 10/31/11 |