

WESTAMPTON RECREATION ADULT / H.S. INDOOR SOCCER LEAGUE 2017 REGISTRATION FORM – AUTHORIZATION AND RELEASE

REGISTRATION DATE: FRIDAY, DECEMBER 2, 2016 **TIME:** 7:00 PM – 9:00 PM
LOCATION: WESTAMPTON MUNICIPAL BUILDING, 710 RANCOCAS RD.
REGISTRATION FEE: \$50.00 PER PARTICIPANT (\$5 EXTRA PER SHIRT / \$10 FOR BOTH IF NEEDED)

PROGRAM INFORMATION

Please record one (in each box):
<input type="checkbox"/> Adult Division <input type="checkbox"/> HS Division / Grade _____
<input type="checkbox"/> New Player or Returning to Team No: _____

Separate division for high school players in 9th through 12th grades and all adult players. League will start on January 13th and run for approximately 10 weeks. Each team will be coed with 10 to 12 players. High school games will be played either Thursday or Friday night at 6 pm or 7 pm. Adult games will be played on Fridays, either at 7 pm, 8 pm, or 9 pm, at various locations throughout the area. Games will be 1 hour (two 25-minute halves) with a 5-minute half time. Each player will be required to have 2 shirts (Ash - for away games / Dark Green – for home games); which shirt to wear will be determined by schedule. You must have a shirt to play. A \$5.00 late fee will be charged to all those who register after December 2, 2016. No refunds will be given. Checks made payable to Westampton Rec. This is not a school-sponsored event/activity.

PLEASE PRINT – USE ONE FORM PER PARTICIPANT

PARTICIPANT'S NAME: _____ SEX: MALE: _____ FEMALE: _____

ADDRESS: _____ TOWN: _____ ZIP: _____

(1st) CONTACT PHONE No.: (_____) _____ (2nd) CONTACT PHONE No.: (_____) _____

E-MAIL ADDRESS: _____

EMERGENCY CONTACT & PHONE #: _____ (_____) _____

Do you have any known allergies or medical conditions that need specific attention during the program? Please be very specific: _____

_____ "ASH" SHIRT – ADULT SIZE NEEDED: ___ SM ___ MED ___ LG ___ XL ___ XXL ___ XXXL

_____ "DK. GREEN" SHIRT – ADULT SIZE NEEDED: ___ SM ___ MED ___ LG ___ XL ___ XXL ___ XXXL

In agreeing to participate in this activity, as a participant, I affirm that my general health is good and that I am not adversely affected by exercise and am capable of performing an activity of this nature. In consideration of participating in this activity, I do hereby assume all risk of any injury to myself and will indemnify and hold harmless from any and all liability, actions, causes, claims, and demands of every kind of nature whatsoever that I have or which arises of or in connection with my participation in this activity, the County of Burlington, the townships mentioned above, their recreation departments and their township school boards, and all their officers, agents, employees, staff, volunteers, and successors. It is likewise assumed and agreed that the participants will wear proper clothing and protective equipment during the activity and that it is the responsibility of the participant to see these criteria are met. I also agree to allow transportation to the nearest physician or hospital for medical treatment and agree for immediate first aid if injured when deemed necessary. I also understand that the townships mentioned above do not provide accident insurance for any of their participants.

Participant's signature: _____ Date: _____

ARE YOU INTERESTED IN BEING CAPTAIN OF YOUR TEAM? YES _____ NO _____

ANY QUESTIONS, PLEASE CALL THE WESTAMPTON RECREATION OFFICE: (609) 267-1891 (EXT 8)

2017 Adult / HS Indoor Soccer Registration	Do Not Write in This Box – For Accounting Purposes Only
For Office Use Only:	Amount Paid: _____ Cash: ___ Check No.: _____ Received By: _____