

KIDS ON THE MOVE REGISTRATION FORM 2017



PARTICIPANT'S NAME _____ SCHOOL _____ GRADE _____ AGE _____ BIRTHDATE _____

PHONE NUMBER _____ E-MAIL ADDRESS _____

ADDRESS _____

PARENT 1 NAME _____ RELATION _____ PARENT 2 NAME _____ RELATION _____

WORK/CELL NUMBER _____ WORK/CELL NUMBER _____

PICK UP AUTHORIZATION LIST

NAME _____ PHONE NUMBER _____ RELATIONSHIP TO CHILD _____

NAME _____ PHONE NUMBER _____ RELATIONSHIP TO CHILD _____

EMERGENCY CONTACT PERSON (Other than guardian listed above)

NAME _____ PHONE NUMBER _____ RELATIONSHIP TO CHILD _____

ALLERGIES/MEDICAL PROBLEMS/ SPECIAL CONCERNS

PHYSICIAN'S NAME _____ PHONE NUMBER _____

PARTICIPATION/INSURANCE/PHOTO & VIDEO WAIVER

Use of the YMCA facilities and participation in sports or other physically demanding activities inherently exposes participants to a certain degree of risk of personal injury, illness, and other adverse medical consequences. The YMCA is not an insurer of a member's life or personal safety. No member will engage in activities which require a level of physical fitness exceeding the member's physical condition or abilities, as determined by the member. Every member assumes the risk of personal injury, illness, or other conditions arising out of or related to the member's activities on YMCA premises and releases the YMCA, its directors, officers, agents, and employees from all claims, actions, or liability on account of such causes.

I am an adult over 18 years of age and wish to participate in Naugatuck YMCA membership/program activities. IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating inspected and carefully considered such premise and facilities or the affiliated program. In addition, I give my children permission to participate in Naugatuck YMCA activities. I understand that even when every reasonable precaution is taken, accidents can sometimes happen. Therefore, in exchange for allowing me to participate in YMCA activities, I understand and expressly acknowledge that I, for myself, or anyone entitled to act on my behalf, waive and release the YMCA, sponsors, representatives, and successors from all claims or liabilities of any kind arising out of my participation in activities at or sponsored by the YMCA. I further agree to indemnify and save harmless the YMCA from any claims or demands arising out of any such injuries or losses. I understand that this release includes any claims based on negligence, action or inaction of the Naugatuck YMCA, its staff, directors, members and guests. I have read, understand, and am voluntarily signing this authorization and release.

I understand that the Naugatuck YMCA is not responsible for personal property lost, damaged, or stolen while member and/or program participants are using YMCA facilities, on YMCA premises, or involved in YMCA programs. I give my permission to the Naugatuck YMCA to use limitation and obligation, photographs, film footage, or tape recordings which may include my image or voice for the purposes of promotion or interpreting YMCA programs.

PARENT/GUARDIAN SIGNATURE

DATE

Name on Card: _____

Check # _____ Credit Card Number: _____ Exp Date: _____ CVV Code: _____