



YOUTH INTER-TOWN SOCCER PROGRAM REGISTRATION



Participant's Name: _____ Phone: _____
 Address: _____ Birth Date: _____
 E-mail Address: _____ Age: _____ Grade: _____ Sex: _____

Does your child currently play on a Travel Team? Yes No
 (Note: as of August 2018, "Dual Players" are not allowed. If a player is part of a Travel and/or Club Soccer program they are not eligible to play in the In-Town Recreational League.)

Special Requests: (i.e. Carpooling Needs) _____

Please list any other nights your child has an activity that may conflict with practices or Saturday games.

(Manville Recreation Department will make every effort to accommodate special requests, however they are not guaranteed.)

Returning Soccer Player **With Jersey** **Without Jersey (select size below)**

Shirt Size: Youth Small (8/10) Youth Medium (10/12) Youth Large (14/16)
 Adult Small Adult Medium Adult Large Adult XL Adult 2XL

All participants in programs sponsored by the Manville Recreation Department are subject to the rules and regulations established by the Department and to such written or verbal directives, which may be issued by the Department, Instructors, coaches and other authorized personnel. The failure of any participant or spectator to comply with the rules, regulations, and directives, or conduct by any participant or spectator which is disruptive of any program or which poses a danger to others will subject the offending individual to discipline, including removal from the program. Program Fees are non-refundable.

I understand and acknowledge that enrollment in any program expressly subject to the conditions stated herein.

 Parent or Guardian Signature

 Parent or Guardian Printed Name

 Cell Phone Number

 Secondary Contact Name Cell Phone #

- Please Check Here if you are Interested in Coaching
- Please Check Here if you need a Coach's Certification

PROGRAM FEE: _____

CHECK NUMBER: _____

CASH: _____

RECEIVED BY: _____

DATE/TIME RECV'D: _____

PHOTO CONSENT FOR MINORS

From time to time the Manville Recreation Department will feature its programs in the local newspaper, Manville Recreation Facebook page and the Borough of Manville website. While the intent of this practice is to be informative, there is a concern about the individual rights to privacy. In order to provide parents and participants the option to exercise their right to privacy, the Recreation Department is providing the opportunity to have individual names and pictures removed from all lists and publications.

- _____ Please include my child's name and/or picture on programs, publications and website.
- _____ Please include my child's picture, but not my child's name on programs, publications and website.
- _____ Please exclude my child's name and/or picture from all programs, publications and website.

** In the event that this photo consent is not completed, your child's name and/or picture will be excluded from all programs, publications and websites.

Medical Conditions:

Please list any and all medical conditions for the person registered in any Borough sponsored program, on the opposite side of the page on the line provided. **** Please note the Borough and its employees or volunteers will not dispense any medication, prescribed or over the counter or administer the EPI pen except for those participating in the Recreation programs. We require the parents to bring a signed letter of authority with instructions.**

Medical Restrictions: _____

Special Needs / Reasonable Modifications:

Manville Recreation welcomes individuals with disabilities to participate in all recreation programs and activities. In accordance with the Americans with Disabilities Act (ADA) please describe below any modifications needed for you or your child’s enjoyment of this program. A staff member will contact you for more information.

If any participant has individualized needs due to a disability, please check the following and someone will contact you regarding reasonable modifications. ___ Yes, I will need to be contacted regarding reasonable modifications for my child and I have provided the necessary three (3) weeks notice prior to the beginning of the program.

Indemnification and Hold Harmless Agreement

Release: I and behalf of adult family members and minor children who are listed in this application hereby release the Borough of Manville and the Borough of Manville Recreation Department from any and all liability from bodily injury, personal injury and/or property damage that may occur on premises or as a result of our participation in the Borough of Manville Recreation program. The participants named in this application individually or through their parent or guardian, hereby agrees to protect, indemnify and hold harmless the Borough of Manville, its officers, directors, employees, officials, volunteers, agents, subcontractors and affiliates (collectively referred to as “Indemnified Parties”) from and against any and all liabilities, losses, damages, costs, expenses (including attorney’s fees and expenses), causes of actions, suits and claims of any nature whatsoever. Such indemnification shall include but not be limited to, matters arising from, based upon, or relating to (a) Personal Injury or death to, or damage to or loss of property of, loss of use of property, to any person caused in whole or in part by the negligence of the Indemnified Party in connection with such Indemnified Party’s involvement or participation in the afore-mentioned activity.

Signature

Parent/Guardian Signature _____ Date _____

Print Name _____