

# Heart for the Game YOUTH SPORTS REGISTRATION FORM

Date: _____
Member #: _____
Amount paid: \$_____
Receipt #: _____

1. Sport Registering For: \_\_\_\_\_

2. Please Check one:  Spring  Summer  Fall  Winter

Uniform Size (See sample sizes at desk):  YXS  YS  YM  YL  AS  AM  AL  Other

3. **Volunteers Needed** (please Check all that you might be interested in):  Coach  Assistant Coach  Other  
Volunteer

4. Complete the personal information in the box below:

Parent Email address: _____ Please ensure that you include an email address (Primary form of communication).
Childs (FULL) name: _____ Sex <input type="checkbox"/> M <input type="checkbox"/> F Age: ____ DOB: _____
Best contact number: _____ School attending: _____
Home address: _____ City: _____ State: ____ Zip: _____
Mother's name: _____ DOB: _____ Employer: _____
Cell phone number: _____ Work phone number: _____
Father's name: _____ DOB: _____ Employer: _____
Cell phone number: _____ Work phone number: _____
Siblings participating: (1) _____ (2) _____ (3) _____

4. How many years has your child played organized sports?: \_\_\_\_\_

For the balance in forming teams, AT PLAY, your child is best described as:

Mark one (1-least aggressive to 5-most aggressive):  1  2  3  4  5

5. Please list other previous sports experience: \_\_\_\_\_

Heart for the Game (HFTG) considers all registrations without regard to race, color, religion, sex, national origin, or the presence of medical condition or handicap. However, HFTG does reserve the right to refuse admission to any child who may require a level of attention beyond that which HFTG programs are designed to accommodate or who may require specialized training that may prevent HFTG staff from adequately meeting the needs of the child. I agree to abide by the rules and regulations as set forth by the HFTG staff. I will fully accept the decision of the HFTG staff regarding the placement of my child on a team. I will also conduct myself with a positive attitude toward coaches, opposing team players, officials, and HFTG staff members during the course of the season. I understand that I am responsible for my child's own personal insurance coverage. I hereby give permission for HFTG to use for promotional purposes any photos or videos taken of my child while involved in this program. By signing my name below, I am indicating that: this registration form is correct to the best of my knowledge and that child herein described has permission to engage in all prescribed activities except those noted by me. I understand that sport activities have inherent risks and I hereby assume all risks and hazards incident to my participation in all HFTG activities. I further waive, release, absolve, indemnify and agree to hold harmless HFTG, the organizers, volunteers, supervisors, officers, directors, participants, coaches, referees, as well as, persons or parents transporting participants to and from activities from any claims or injury sustained during my participation in HFTG activities.

**Note:** Refund requests must be made before the first game. No refunds will be given after the first game. If requesting a refund, there will be a \$15.00 administrative fee charged.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_