

# **INNER CITY YOUTH SPORTS LEAGUE PROGRAM**

## **Summer Camp Youth Sports Team Registration Form**

**Sport:** \_\_\_\_\_

**Participant Name:** \_\_\_\_\_ **Sex** \_\_\_\_ **Birthday** \_\_/\_\_/\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Height:** \_\_\_\_\_ **Weight:** \_\_\_\_\_

**School:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **District:** \_\_\_\_\_

**T-Shirt Size:** \_\_\_\_\_

**Special Health Needs:** \_\_\_\_\_

### **Emergency Contact**

**Parent/Guardian Name:** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Emergency Contact Person:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

I give my son/daughter \_\_\_\_\_ permission to participate in recreation programs. I understand safety and precautions will be provided. I waive all responsibility of Unity C.D.C and participating churches and organization for any and all injuries my child may sustain while participation in the summer league. Unity C.D.C will not be responsible for transportation to and from the league game and practices. In case of injury I give my permission to youth director / or assigned councilor to administer first aid and contact emergency services for my child. I give permission for use of photos which may be used in Unity newsletter and websit