



# Easton-Newberry Sports Complex Registration / Liability Form

PLEASE PRINT CLEARLY

## Client Information

Print Name: \_\_\_\_\_ Gender: Male Female  
Last First

Address: \_\_\_\_\_  
Street City State Zip

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_ Pant Size: \_\_\_\_\_  
mm/dd/yy

## Parent/Guardian Information

**Check Here If Same As Above** \_\_\_\_\_

Print Name: \_\_\_\_\_  
Last First

Address: \_\_\_\_\_  
Street City State Zip

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

## Emergency Contact Information

Print Name: \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ Alternate Phone: (\_\_\_\_) \_\_\_\_\_

Medical History: \_\_\_\_\_

Physician Name & Phone: \_\_\_\_\_

Known Allergies & Reaction: \_\_\_\_\_

## Easton Newberry Sports Complex Liability Waiver

"In enrolling at Easton Newberry Sports Complex, participant \_\_\_\_\_ understands that he/she attending the programs and using Easton Newberry Sports Complex and the facilities does so at his/her own risk. Easton Newberry Sports Complex, Easton Sports Development Foundation, National Alliance for the Development of Archery and all owners, employees or agents, shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by participant with his/her family in or about any programs on the premises. Participants and parents assume full responsibility for all injuries and damages which occur in or about any programs on the premises. He/She does hereby fully and forever release discharged hold harmless Easton Newberry Sports Complex, Easton Sports Development Foundation, National Alliance for the Development of Archery and all associated facilities and its owner, employees, and agents from any and all claims, demands, damages or rights of action, present or future resulting from any person's participation in any programs or use of the facility. In addition, he/she agree(s) to follow the rules of conduct and play set by Easton Newberry Sports Complex. Failure to do so may result in suspension from participation. Consent: I the undersigned parent or guardian/participant does hereby grant authority to the staff at Easton Newberry Sports Complex to render a judgment concerning medical assistance or hospital care in the event of an accident or illness during my absence. I do hereby authorize Easton Newberry Sports Complex and its assigns to utilize any and all photographs, pictures or other likeness of me or anyone assigned guardianship to me, as they deem appropriate in its promotional materials or team films".

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**If under the age of 18 years old, you must have a parent/guardian signature.**

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_