## Micheal Benton FAMILY LIFE CENTER, Inc.

## YOUTH BASKETBALL REGISTRATION FORM

(Attach Birth Certificate and Picture)
REGISTRATION DEADLINE IS DECEMBER 3, 2016

## CIRCLE YOUTH OR ADULT SIZE

Name:			UNIFORM SIZE TOP		UNIFORM SIZE BOTTOM
Home Address:			ADULT or YOUTH S M L XL 2X		ADULT or YOUTH S M L XL 2X
City:			Pho	no:	
		Zip Code	1110		
Parent / Guardian		Cell Phone	Email		
N	IEDICAL AND EMER	GENCY CONT	ACT INFORMATIO	ON	
			./Z		
Emergency Contact	Home Phone	Cell Phone	Work Phone	_	Relationship
Doctor Name Phone Number	Group Policy Number	Medical Insu	rance Company Hospita	l Preference	Date of last Physical
Yes No Does your child have any illne	ess that requires medication?	☐ Yes ☐ No Is	there special health inform	ation we sho	uld know about your child?
NOTE: If you answered YE	CS to any of the above question	ns please fill out ad	ditional form. Maybe rece	ive from FB	C Representative.
I hereby warrant and represent that I am the leg				and make th	nis decision. Initial Here
Date-of-Birth:					yer: Y N
<b>BOYS</b> $\Box$ 5-6(c)	, , , ,		13-14 15-16	5 L	17U
AGE GROUPS:	·	Keith Benton (4	104)309-0425		l
GIRLS $\Box$ 5-8		☐ 14-17 Siffings McCilbor	ry (770)363 6122	- 1	l.
Girls Director: Tiffinee McGilberry – (770)363-6122					
Mícheal Benton Famíly Lífe Center, Inc. and United Christian Athletic Association  WAIVER and Hold Harmless Agreement					
(FBC), Micheal Benton Family Life Center, Inc. (Nof my child with or without my name and for any I a subsidiary of Fairfield Baptist Church, and the Lparticipants, and the community. In consideration organized by the Micheal Benton Family Life Cen AND AGREE TO HOLD HARMLESS for any and each and every organization involved with sponse ("ORGANIZERS") FROM ANY AND ALL LIABILI participation in the COMPETITION or their use of contact with other members, the floor, field, or eq sports to my child and my child is in proper physic participants.  Initial Here  My child's participation in COMPETITION and its ANY RISKS OF LOSS, PROPERTY DAMAGE O activities and events, WHETHER CAUSED BY A HOLD HARMLESS the ORGANIZERS for any lo and events. It is my express intent that this CONN heirs, assigns and personal representatives, if I a	awful purpose, including publicit Jnited Christian Athletic Associa of giving my permission for my ter, Inc., and the United Christial all purposes the Micheal Bento oring the COMPETITION, and the TIES, CLAIMS, DEMANDS, DAI equipment or facilities provided uipment, and that there is a rest cal condition to play basketball associated activities and events R PERSONAL INJURY that man N ACT OF COMMISSION OR Cost, liability, damage or costs that VENANT NOT TO SUE AND HOm deceased.	y, illustration, advertistion are non-profit chechild to participate in an Athletic Association Family Life Center, neir officers, directors, MAGE TO PROPERT by the ORGANIZERS ulting risk of physical i and has no existing injustical to the profit of the partition of the partiti	ing, and Web content. I unde aritable institutions, which is variable institutions, which is variable institutions, which is variable. The second of the 2016-2017 basketball sea in I hereby RELEASE, WAIVI Inc., the Fairfield Baptist Chuagents, volunteers, or employ. OR PERSONAL INJURY S. I also understand that bas njury to my child. I have expluries or conditions that could ary at our own risk. I VOLUNT or as a result of his/her particulation of the ORGANIZERS or othe lift of my child's participation is gement shall bind the member	rstand that Nooluntarily pre ason (hereby E, DISCHARG rrch, the Unit byees (hereby that may be s ketball is an a ained these r jeopardize h "ARILY ASSU cipation in the erwise. I FUR n the COMPE ers of my famil	licheal Benton Family Life Center, Inc senting this program for my child, oth called the ("COMPETITION"), which GE, AND COVENANT NOT TO SUE ed Christian Athletic Association, and collectively called the sustained as a result of my child's active sport, which can involve physic isks and the benefits of playing team is or her safety or health of the other UME FULL RESPONSIBILITY FOR COMPETITION and its associated THER AGREE TO INDEMNIFY AND ITITION and its associated activities ly and spouse, if I am alive, and my
In signing this COVENANT NOT TO SUE and HO HARMLESS agreement, understand it, and sign is that has been reduced to writing have been made.	t voluntarily as my own free act	and deed; no oral rep	resentations, statements, or i	inducements	apart from the foregoing agreement
I/we the undersigned, being a parent or guant HOLD HARMLESS AGREEMENT.	ardian of the minor listed ab	ove and having leg	al capacity to act on his/h	er behalf, d	o hereby consent to the foregoin
Parent/Guardian Signature:			Date		
PLEASE DO NOT WRITE BELOW THIS LINE OFFICIAL USE ONLY					
	REGISTRATIO	GISTRATION N WILL BEGIN OF NDS AFTER DECE	N OCTOBER 1, 2016		
☐ Money Order Receipt #:	Date Paid _	Pa	ay Online by <u>Pay Pal</u>		
Credit Card Amt Paid \$	Received By:	0)482-7660 Evt 203 * 1	www.fairfieldhantictchurch.org	Da	ate: