

WHITESBORO P.A.R.D. SUMMER TRACK

REGISTRATION DEADLINE – FRIDAY, MAY 7TH , 2010 AT 5:00PM

REGISTRATION FEE - \$ 25.00

SEND COMPLETED FORM, FEE AND COPY OF BIRTH CERTIFICATE TO PO BOX 340, WHITESBORO, TX 76273 OR BRING TO P.A.R.D. AT 400 N. WILSON. **DO NOT SEND TO SCHOOL**

TRACK AGES ARE: FIRST GRADE THRU HIGH SCHOOL SENIOR

(PLAYER'S LEGAL NAME) LAST NAME _____ FIRST _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____ PHONE _____

DATE OF BIRTH—MONTH _____ DAY _____ YEAR _____ MALE/FEMALE _____

SCHOOL _____ GRADE _____

FATHER'S NAME _____ OCCUPATION _____

MOTHER'S NAME _____ OCCUPATION _____

FATHER'S BUS. PHONE _____ MOM'S BUS. PHONE _____

E-MAIL ADDRESS _____

MEDICAL PROBLEMS OF PLAYER _____

DOCTOR TO NOTIFY IN EMERGENCY _____ PHONE _____

PERSON TO NOTIFY IN EMERGENCY(NOT PARENTS) _____

PHONE NUMBER _____

T-SHIRT SIZE – CIRCLE ONE YS 6-8 / YM 10-12 / YL 14-16 / AS / AM / AL / AXL / AXXL

TANK TOP SIZE – CIRCLE ONE YS 6-8 / YM 10-12 / YL 14-16 / AS / AM / AL / AXL / AXXL

SHORT SIZE- CIRCLE ONE YS / YM / YL / AS / AM / AL / AXL

LIABILITY WAIVER AND CONSENT FOR MEDICAL TREATMENT

I, HEREBY GIVE MY APPROVAL FOR THE ABOVE-NAMED TO PARTICIPATE IN THE PARD YOUTH SPORTS PROGRAM. I ASSUME ALL RISK AND DO HEREBY WAIVE, RELEASE AND AGREE NOT TO HOLD THE CITY OF WHITESBORO, THE PARD, THE ORGANIZERS, SPONSORS, SUPERVISORS PARTICIPANTS AND PERSONS TRANSPORTING MY CHILD RESPONSIBLE FOR ANY INJURY THAT MAY BE INCURRED WHILE PARTICIPATING IN THE PROGRAM. AS THE PARENT OR LEGAL GUARDIAN OF THE ABOVE-NAMED PLAYER, I HEREBY GIVE CONSENT FOR EMERGENCY MEDICAL CARE PRESCRIBE BY A DULY LICENSED DOCTOR OF MEDICINE OR DENTISTRY. THIS CARE MAY BE GIVEN UNDER WHATEVER CONDITIONS ARE NECESSARY TO PRESERVE THE LIFE, LIMB OR WELL-BEING OF MY DEPENDENT. I DO HEREBY FULLY AND FREELY CONSENT TO THE USE OF THE PARTICIPANTS PHOTOGRAPH FOR PROMOTIONAL PURPOSES ON BOTH PRINTED MATERIALS AND WEBSITES. I DO HEREBY RELEASE AND HOLD HARMLESS THE CITY OF WHITESBORO FROM ANY LIABILITY ARISING OUT OF SAID PARTICIPATION IN A PUBLICATION, ADVERTISEMENT, AND/OR PROMOTION.

SIGNATURE OF PARENT/GUARDIAN _____