2020 *Boys Basketball 7th - 8th Grades January 9 - March 5

Instructions: Please Print Clearly. Complete separate form for each participant, sign waiver and medical information. Return this form with fee to: First Friends Church, Attn: Sports Office, 5455 Market Ave N, Canton, OH 44714 <u>Please do not include fee in your church offering!</u>

Last Name	EMERGENCY PROCEDURE INFO Person to contact in emergency:
First Name	
Address	Person's Home Phone
CityZip	Person's Work Phone
PhoneBirth Date	Second contact in emergency:
Daytime Phone (M or D)	
Father's Name	Person's Home Phone
Mother's Name	Person's Work Phone
*E-mail	Please list any allergic reactions, serious injuries of
Please print legibly. SchoolGrade	special medical procedures.
birth gender of the participant. For all of our leagues, classes, unless they are designated as Coed, it is our policy that players participate within the gender designation that complies with the previous statement. We want to thank you for your understanding and cooperation in this matter" Is this the first time your son has participated in First Friends Sports Activities? Yes No Participant's Jersey Size: (circle one)	Hospital Preferred Doctor Dentist I give my permission to the staff to secure a
Youth S (6-8) M (10-12) L (14-16) Adult S M L XL XXL XXXL	licensed physician in the case of an emergency to provide the necessary care.
Parents: I would like to coach in this league. Yes No	Parent Signature Date
Name	(Please read and sign waiver form below)
Coach Shirt Size S M L XL XXL (Please circle) Registration Fee (must be paid with registration) \$\frac{55}{20}\$ Registration fee \$\frac{50}{100}\$ (FFC jersey required, if you don't have one from previous year) Total Due (\$5.00 fee for all refunds) *See Refund policy on website page	NOTE: There is no longer a guarantee of grouping players together for carpooling purposes. These leagues are going to be drafted according to ability, to best serve each player. Requests can be made, however they ARE NOT guaranteed Requests that affect the competitive balance of the team cannot be honored.

Please make checks payable to First Friends Church

WAIVER AND INFORMED CONSENT STATEMENT

In consideration of my child's participation in the activities of the First Friends Church, I do hereby declare him/her to be medically able to participate in the activities (basketball, softball, volleyball, etc.) offered by First Friends Church (I understand that there are risks which may include disabling injury and/or death involved in all physical activities and I agree to familiarize myself with all equipment, facilities, rules and physical demands related to the activities undertaken.) I agree to hold free from any and all liability the First Friends Church and its respective officers, employees, members, volunteers, and sponsors and do hereby for myself, my heirs, executors and administrators waive, and release and forever discharge any and all rights and claims for damages which my child may have or which may accrue to him/her arising out of or connected with his/her participation in any of the activities of the First Friends Church. I have been appraised of and acknowledge the particular hazard and potential danger involved in my child's participation in the 2020 leagues. I hereby authorize First Friends Church Sports Ministry to use, reproduce, distribute, display, and to license others to use, reproduce, distribute, and display, my child's image, and photograph, as well as any video, digital, or audio recording or reproduction, in connection with external and internal communications of First Friends Church Sports Ministry for the sole purpose of advancing FFC Sports programs.

Parent Signature:	Date	
_	Please complete form and submit with payment to address listed above.	