

VILLAGE OF LOCKLAND - SPORTS REGISTRATION



Circle below first



→ **Sport:** *T-Ball* *Baseball* *Softball* (circle one)

→ **Gender:** *Boy* - *Girl* (circle one)

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

Name \_\_\_\_\_

First

Middle

Last

Home Phone \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent or Legal Guardian \_\_\_\_\_

Cell Phone \_\_\_\_\_ Emergency Phone Number \_\_\_\_\_

I hereby permit \_\_\_\_\_ to participate in the activity indicated above. Furthermore, I do hereby and forever release the Village of Lockland, it's officials, employees or agents and their heirs, assigns from all claims and liabilities from any accident or injury related to or as a result of his/her participation in the recreation activity above.

**Sign-up fee: \$10.00 per child per sport**

**Sign -up fee must accompany registration form and be returned to Lockland Town Hall office (101 North Cooper Ave) by February 28, 2025. Late Registration does not guarantee a place on a team.**

Are you interested in coaching Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_

Parent or legal guardian signature

Date

VILLAGE OF LOCKLAND RECREATIONAL DEPARTMENT

WAIVER FOR PARTICIPANT AND/BY PARENT

Primary Guardian (**PRINT**) \_\_\_\_\_

If under 18 years of age please list names below:

Participant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Participant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Participant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Participant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Work Phone Number \_\_\_\_\_

Emergency Phone Number \_\_\_\_\_ Emergency Contact \_\_\_\_\_

Please read carefully:

In consideration for me or my child's membership registration, I hereby, for myself my child, my heirs, executors, and administrators, waiver and release any and all rights and claims for damages I or my child may have against the Village of Lockland, its employees, and representatives, successors and assigns for any and all injuries suffered by myself or my child on any activity sponsored by these groups. For the consideration stated above, I further agree that in the event that my child repudiates or attempts to repudiate such release, I will personally indemnify and save harmless the Village of Lockland it's employees, succors and assigns, for and all loss and damage occasioned thereby.

\_\_\_\_\_  
Signature of parent or guardian Date

Notice to all participants

Participants must recognize that all classes/activities of a physical nature involve some risk and by registering for a class/activity of this nature, there is an assumption of risk by the participant. The Village of Lockland is dedicated to providing safe facilities and equipment for all participants, as well as qualified staff. Every effort is made to ensure the safety of participants and to provide them with first class recreational activities, facilities and parks. In the event of a serious accident or illness, it is the policy of the Village of Lockland to:

- Contact the Lockland Fire and Rescue Department paramedics to perform first aid, and when necessary, recommend transport of the victim to a hospital and;
- Reach the parent or guardian as soon as the situation allows

**\*THIS FORM MUST BE FILLED OUT COMPLETELY**