

NOVATO YOUTH VOLLEYBALL ASSOCIATION FALL 2011 - PLAYER REGISTRATION FORM

CHILD'S NAME:	Date of Birth:			
Grade Fall 2011:	School:			
Home Address:			- •	
S	treet	City	Zip	
Email Address:				
Mothers' Name:		Fathers' Name:		
Mother's Home Phone: (Mother's Cell: ()		
Father's Home Phone: ()	Father's Cell: ()		
Which is the best phone nu	umber to reach y	70u:		
Other than Parents, At Lea	ıst Two Emerger	ıcy Contacts – Name and I	Phone Numbers -	
Please List All Numbers – use reverse if necessary:				
Pediatrician Name & Phone	e No.:			
Dentist Name & Phone No.	:			
Medical Insurance Carrier:				
Phone Number (usually fou		•		
Group/Policy Number (List	: All – Specity):			
Periodically, we post new pphotos where your daughte		•		
BY SIGNING BELO	W, YOU AGRE	E TO IMMEDIATELY N	OTIFY US IN	
WRITING OF ANY CHA	NGES TO THE	ABOVE INFORMATIO	N. THANK YOU.	
PAREN	r signature	DATE		

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<u>CANCELLATION/REFUND POLICY</u> - We are flexible and fair and will consider any reasonable situation which may arise. When we receive registrations, we accept it with a commitment of participation from you/your daughter, barring, of course, any highly unusual and unforeseen circumstances. Should <u>you</u> need to cancel registration, a full refund will be given as long as the registered spot is taken by another individual on the "Wait List". Should <u>we</u> need to cancel for any reason, we will refund 100% of your registration fee.

I understand the above Cancellation/Refund Policy: Parent Initial Here

Mail Registration & Payment To:

Novato Youth Volleyball Assoc. 936 B Seventh Street, # 354, Novato, CA 94945

WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

I/We, the undersigned, are the parents and/or legal guardians of the minor child named below. We wish to enroll our minor child to participate in Novato Youth Volleyball Association, LLC, ("NYVA") programs and/or activities.

In consideration of NYVA allowing my/our child to participate in the programs and activities run by it, we agree to indemnify and hold harmless NYVA and their respective shareholders, members, directors, officers, employees, and/or agents, including any minor and/or adult volunteers working with NYVA (hereinafter collectively "Releasees") from any and all claims, demands, losses, costs, expenses, obligations, liabilities, damages, recoveries and/or deficiencies, including interest, penalties and reasonable attorney fees that Releasees may incur or suffer, which arise, result from, or relate to our minor child's participation in the programs and activities of NYVA. Such agreement to indemnify and hold harmless extends to any damages or claims for property damage, bodily injury or death to or caused by my minor child, while participating in any NYVA program or activity. I understand my minor child does not have the legal capacity to contract and thus in the event a claim or action is brought on their behalf against NYVA or Releasees resulting from my child's participation in any NYVA program or activity, my agreement to indemnify and hold harmless NYVA and Releasees will extend to any judgment rendered in favor of my child against either entity or their agents.

I/We understand by signing this Waiver of Liability and Hold Harmless Agreement that it covers not only the current program but also any future periods of time which our minor child is participating in programs or activities of NYVA.

NAME OF MINOR CHILD (Please Print): $_$	
SIGNATURE OF PARENT(s):	
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NAME OF PARENT(s) (Please Print):	
, ,	
DATE SIGNED:	