

PT AFFILIATES SUMMER SCHOOL ATHLETIC PROGRAM REGISTRATION FORM

Please PRINT neatly the following information:

Student Last Name _____, First Name _____ MI _____

Date of Birth _____ Sex _____ Grade in Fall '08 _____

Father/Guardian Last Name _____, First Name _____

Mother/Guardian Last Name _____, First Name _____

Address _____ City _____ ZIP _____

Home Phone # _____ Father's Work # _____

Mother's Work # _____

Mother's Cell# _____ Father's Cell# _____

Another Emergency Contact _____ Phone# _____

Please enroll in:

Sport: _____	Fee _____
Sport: _____	Fee _____
TOTAL FEES DUE: _____ CHECK # _____ DATE _____	

GENERAL RELEASE, WAIVER, INDEMNITY AGREEMENT

I certify that I am the above named participant's parent/guardian, and that I am entitled to his/her custody and control, and I do hereby give my permission for said minor to participate in the sport(s) listed above. I further certify that said minor is in good health and has no physical or other impediments, which would endanger said minor while participating in these sports. Since the above involves a risk of injury to participants, each participant and his/her parent/guardian assume all risk by signing this General Release, Waiver & Indemnity Agreement. In consideration of PT Affiliate's acceptance of said participant's application for participation in the above sport(s), I, for my child, heirs, executors, administrators, and assigns hereby waive, release and discharge the PT Affiliates, the San Marino Unified School District, and their officers, agents, and employees, and all sponsors and other entities and individuals associated with such sports (collectively known as "releasees) from any and all claims for damages, for death, or personal injury which said minor may have or which may hereinafter accrue to said minor as a result of said minor's participation in the above listed sport(s), and I further agree to indemnify and hold harmless from any liability or claim or action for damages which in any way arises from said minor's participation in this activity, even though that liability may arise out of negligence or carelessness on the part of any of the releasees. I further understand that accidents may occur during such sports and that participants in such sports may sustain personal injuries as a consequence. Thereof, knowing the risks of such sports, I hereby agree to assume those risks and to release and hold harmless the releasees from any liability to said minor or our heirs or assigns for damages arising out of or related to said minor's participation in such sports. In the event of sudden illness, accident, or injury which may occur while said minor is engaged in a sport supervised by PT Affiliates and their representatives, agents, or assignees when neither the parent/guardian nor designated emergency number can be contacted, I hereby give my consent pursuant to California Civil code 25.8 for emergency treatment as shall be necessary under the circumstances by any physician licensed under the laws of the State of California.

Signature of Parent/Guardian _____ Date _____

Circle parent or guardian