



Registration Form for After School Academy

Child's Name: _____ Date of Birth: _____

Phone: _____ Email: _____ Shirt Size: _____

Address: _____
(Street, Town, Zip)

Registering For: (check all that apply)

Monday Soccer Skills	4:00		5:00		6:00	
Wednesday Soccer Skills			5:00		6:00	
Thursday 5v5 Soccer League*	If 5v5 League, Grade: _____					
Baseball Skills	4:00		5:00			
Speed & Agility						

Registering for session: _____

*Must have shin guards for Thursday 5v5 Soccer League

RELEASE, WAIVER AND CONSENT

In enrolling at Westmont Yard, participant and his/her parents or legal guardians understand that he/she is attending the programs, events and/or competitions at Westmont Yard and using Westmont Yard and the facilities and equipment at Westmont Yard (collectively, the "Premises") at his/her own risk. Westmont Yard Corporation and its owners, employees, agents, contractors, affiliates, subsidiaries, successors and assigns (the "Westmont Yard Parties") shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by participant or his/her family participating in or related to any programs, events or competitions on or around the Premises, including, without limitation, any personal injury or property loss resulting from the negligence of the Westmont Yard Parties. Participants and parents or legal guardians assume full responsibility for all injuries and damages which occur in or are related to any programs, events or competitions on or around the Premises. Participants and their parents or legal guardians do hereby fully and forever release, discharge and hold harmless the Westmont Yard Parties and all associated facilities from and against any and all claims, demands, damages or rights of action, present or future resulting directly or indirectly from any person's participation in any programs, events or competitions or use of the Premises, including, without limitation, those resulting from the Westmont Yard Parties' negligence or the acts authorized by the consent below. In addition, he/she agree(s) to follow the rules of conduct and play set by Westmont Yard Corporation. Failure to do so may result in suspension from participation.

Consent: I, the undersigned parent or guardian/participant, do hereby grant authority to the staff at Westmont Yard to render a judgment concerning medical assistance or hospital care in the event of an accident or illness during my absence. I do hereby authorize Westmont Yard Corporation and its assigns to utilize any and all photographs, pictures or other likeness of me or anyone assigned guardianship to me, as they deem appropriate in its promotional materials or team films.

Participant (print name) _____

Signature; Parent/Guardian Signature required(IF PARTICUNDER 18): _____

All After School Sports Academy forms must be turned into Kayli, Kimberly or Gwen to finalize registration. Billing for classes will be added into your weekly tuition. You are responsible for terminating your Academy registration if for any reason you need to at any time. By completing this form, you authorize After School Sports to transport your child to classes while attending our After School Sports Program.

Date received: _____ Manager Initials: _____