

How Do I Sign Up?

Bring or Mail Registration Form and Fee to:

First Baptist Church Weber City
155 Elm Street
Weber City, VA

**First Baptist Church
Community Campus**
614 Broadwater Avenue
Gate City, VA

Form and registration fee may be dropped off at either church office between **9:00 A.M. and 2:00 P.M. Monday through Thursday.**

Participation Fee: \$25.00

The deadline for registration is Thursday, May 31, 2018

Coach/Referee Training
Saturday, June 2, 2018 at 11 a.m.

Everyone MUST attend one of the following flag football evaluations

Thursday, May 24 – 5:00 - 7:00 pm
Friday, May 25 – 5:00 - 7:00 pm
Saturday, May 26 – 10:00 - 2:00 pm

Practices Begin the Week of June 18, 2018

First Game
July 7, 2018

Last Game
August 25, 2018

2018 SOCCER REGISTRATION FORM

PARTICIPANT CONTACT INFORMATION:

Last Name _____ First Name _____
Address _____
City _____ State _____ Zip _____
Gender _____ Age _____ Grade (18-19 School Year) _____ Date of Birth _____
Church (If you regularly attend, which one?) _____
Participant Information Notes _____

Does your child have siblings playing in the league? (If so, please list names) _____

PARENT/GUARDIAN INFORMATION:

Father/Guardian _____ Phone _____
Email _____ I would like to be a: Coach _____ Referee _____ Team Parent _____
Mother/Guardian _____ Phone _____
Email _____ I would like to be a: Coach _____ Referee _____ Team Parent _____

Emergency Contact _____ Relation _____ Phone _____
(other than parent)

SIZING:

Player Jersey Size (Circle One): **YXS** **YS** **YM** **YL** **YXL/AS** **AM** **AL** **AXL** **A2XL**

Parent Jersey Size (Optional, \$10.00 per shirt): **Number of shirts:** _____ **Sizes of shirts:** _____

PAYMENT:

Participant Fee: \$ _____

Total: \$ _____

OFFICE USE ONLY

Paid: \$ _____

Payment Type: _____

Amount: \$ _____

EVALUATIONS: (Coaches Use Only)

10 Yard Sprint _____ Breakaway Dribble _____

20 Yard Sprint _____ Stationary Passing _____

Cone Weave _____ Dynamic Shooting _____

Please Read Carefully and Sign Below to Indicate Your Agreement

Note: This form includes a release of liability.

Please review and complete the sections below and sign in the space provided to indicate your agreement with all statements made in such sections.

Authorization and Release of Liability:

I, the parent or guardian of the above-named child, authorizes the participation of my child in the 3:16 Sports Athletic Program (the "Program") of the above-named Church. My child will participate in the 3:16 Sports denoted on this brochure.

I understand that this Program is a nonprofit Christian sports ministry program for youth and that my child's participation is voluntary and not essential to completion of requirements of any program, school, or government agency. I understand that the Program is conducted by the church and its volunteers and staff, including parents of other participating children. I also understand that the church is solely responsible for all aspects of the Program including selection and supervision of all persons conducting the Program. I further understand and agree that my child's participation in athletic and other activities of the Program necessarily involves the risk of injury and even death from various causes, including but not limited to, accidents, falls, strenuous and prolonged physical activity, dehydration, illness, collision or dispute with other participants, weather related injuries, playing area and equipment defects, and negligence of coaches and referees. On behalf of my child and my family, I assume these risks. In consideration of the privileged of my child's participation in the Program, and on behalf of my child and myself as parent/guardian, I hereby release, discharge, hold harmless and indemnify, and covenant not to sue, the church and 3:16 Sports, and all of the church's 3:16 Sports directors, officers, elders, trustees, deacons, employees, volunteers, insurers, agents and representatives, and all other persons associated with the Program (including without limitation any other participating church, sponsors, parents, vendors, coaches, and other game and event workers, officials, drivers, and organizations) as to any and all claims of my child, me and other family members for personal injuries suffered by my child, property damage, medical expenses, and economic loss arising directly or indirectly out of my child's participation in the Program, and any first aid, medical care or treatment provided to my child in the event my child is injured or becomes ill while participating in Program activities, and excepting claims that may not be released under applicable law. This Release of Liability shall be a broadly construed as allowed by law to include all claims and rights that the child, that I, as a parent/guardian, and that other family members may have. I am a legally responsible parent or guardian of my child. If any provision of this Release of Liability shall be binding on me, my family, heirs, next of kin, legal representatives, beneficiaries, successors and assigns I hereby authorize the church and 3:16 Sports 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 the church and 3:16 sports for the sole purpose of advancing 3:16 Sports programs. I acknowledge and consent that registration will allow 3:16 Sports to obtain access to personal information regarding me and my child participant. I agree that 3:16 Sports may use such personal information in a manner consistent with 3:16 Sports Conditions of Use and Privacy as amended from time to time.

Participation and Safety:

I understand that participation in the Program may involve strenuous and prolonged physical activity. I agree that my child is healthy and able to participate in the Program activities. I understand that the church or its representatives may request health information concerning my child and/or ask my child to undergo a medical exam. If the church determines that my child does have a physical, mental, or other condition that may affect his/her ability to safely and appropriately participate in Program activities (or that may affect the ability of other children to participate safely) the church may determine that my child cannot be permitted to participate. I understand and agree that, while the church desires that all children will be able to participate, such decisions may have to be made out of concern for the best interests of my child and other participants.

Consent to Medical Treatment:

In the event my child is injured or becomes ill in Program activities; and if I, the parent or guardian of the above-named child, am not present to make medical decisions, I hereby authorize the church, its staff, volunteers, including volunteer parent participants, coaches, assistant coaches, and referees, supervisors and drivers to arrange for and consent on my behalf to emergency medical and dental care and treatment, including tests and radiological exams, and surgery and hospital care and treatment, and to consent to medications for pain and other conditions as prescribed by medical personnel attending my child. I am responsible for payment of any medical charges or expenses not covered by my insurance or the insurance applicable to my child (if any). My signature below indicates that all information provided in this form is true and accurate and that I fully agree to all statements made on the form including but not limited to, the Authorization and Release of Liability, Medical Conditions and Consent to Medical Treatment. Each responsible parent/guardian should sign.

Signature _____

Printed Name _____

Date _____

Signature _____

Printed Name _____

Date _____