



Family Info	Parent or Guardian 1	Parent or Guardian 2
Name		
Employer Job Title		
Phone 1	H / W / C	H / W / C
Phone 2	H / W / C	H / W / C
Email		
Home Address		
City State Zip		

Please list names of children you wish to register.

#	Student's Name	Age	DOB	M/F	Grade
1.					
2.					
3.					
4.					
5.					
6.					
7.					

Other Siblings (Not Enrolled)

Name	Age

Correlate # with # of student above.

#	Allergies	Disability/Illness/Diagnosis (psychological or neurological)	Dietary Restrictions	Medications*	Other Medical Information Concerns
1.					
2.					
3.					
4.					
5.					
6.					

*Medication will not be administered by staff. If inhaler is needed, child must carry in labeled sandwich bag and permission must be given by parent

List individuals with authorization to pick up child(ren) .
Only persons listed will be allowed to pick up students.
For deletions and/or additions to the authorization list, please contact director.

What sport are you registering for?

What session? _____

What size T-Shirt needed? (Circle)

Youth: XS S M L XL
Adult: S M L XL

Authorization List

WAIVER OF LIABILITY: I hereby acknowledge that participating in activities at ACE Sports & Recreation, may involve activities that could be considered hazardous in nature.

I hereby waive, release and discharge any and all claims for damages for death, personal injury or property damage which I may incur as a participant in the ACE Sports & Recreation Program and hold the Academy of Creative Education harmless for such injuries / losses that may occur as a result of my participation. This release is intended to discharge and hold harmless the Academy of Creative Education, its officers, officials, employees and volunteers, against any and all claims that may occur arising out of or connected in any way with my participation in ACE Sports & Recreation event(s), even though that liability may arise out of the negligence or carelessness on the part of persons or entities mentioned above.

I further understand that accidents and injuries, including death may arise out of the event(s); knowing the risk, nevertheless, I hereby agree to assume those risks and to release and to hold harmless the Academy of Creative Education, its officers, employees and volunteers who (through negligence and carelessness) might otherwise be liable to me (or my heirs or assigns) for damages. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns.

By evidence of my signing the Agreement below, I hereby acknowledge that I have fully read, understood and agree to the above provisions.

Printed Name _____ Signature: _____ Date: _____

