

Hilliard Lynx Middle School and High School Field Hockey Club

Fall 2010



Organized with the support of *The Hilliard Optimist Club*



Fees:

Early Registration \$125.00 (between April 25th and May 31st)

Late Registration \$150.00 (June 1st – June 30th)

1.) \$100.00 check payable to: **Hilliard Optimist Club (\$125.00, if late)**

2.) \$25.00 check payable to: **Melissa Herman, President Hilliard Lynx Parent Boosters**

NO REFUNDS

_____ Please initial here

Player Info: Name: _____

Age: _____ Date of Birth: _____ Grade: _____ School: _____
(Fall 2010)

Medical Conditions: _____

Please provide information on any medical conditions that the Hilliard Lynx Field Hockey Club should be aware of including food allergies, special needs, etc.

Doctor Name and Phone #: _____

Dentist Name and Phone #: _____

Preferred Hospital: _____

Shirt Size:

_____ Yth Lg _____ Adult Sm _____ Adult Med _____ Adult Lg _____ Adult XL

Household Info: Home Phone: _____

Mailing Address: _____ City: _____ Zip: _____

Parent 1 Name: _____ Cell: _____

Parent 2 Name: _____ Cell: _____

RELEASE OF LIABILITY: (Read and Sign Below)

1. For One Dollar and other valuable consideration, I release the City of Hilliard, the Hilliard City Schools, and the Hilliard Optimist Club, its members and coaches of any liability arising out of the participation of my daughter whose name appears above.
2. The undersigned agrees to return all equipment issued by the Hilliard Lynx Field Hockey Club at a time and place designated by the coach. In the event the equipment is lost, damaged or not returned, the undersigned agrees to pay the Hilliard Lynx Field Hockey Club \$50 within ten days of the end of the 2010 Field Hockey Season.
3. The Hilliard Lynx Field Hockey Club will periodically take photographs of participants to promote our program via the website and other printed publications. By signing below you are giving the club permission to publish said photographs.
4. The undersigned understands that **refunds will not be given under any circumstances.**
5. My signature below acknowledges that I have read this document in its entirety, that I understand the terms outlined above, and that I agree to comply with all terms and rules established by the club.

Signature of Parent/Guardian: _____

Signature of Witness: _____ Date: _____