

**Van Wert Parks & Rec
Flag- Football Registration
Lower Division**

Fee: \$30

**K-2nd Grade (Ages 5-7)
Birthday Cut-Off: September 1st**

Registration Form

Players Name: _____ Gender: _____

Age: _____ DOB: ____/____/____ Shirt Size: _____ (Please note Y=Youth or A=Adult Sizes)

Address: _____

Emergency Contact #: _____ Email: _____

Guardians Name: _____ Guardians Name: _____

Phone #: _____ Phone #: _____

School System (Please circle one): Van Wert, Crestview, Delphos, Lincolnview, Other: _____

Participant Wavier

I recognize that because of the potential hazardous nature of this activity that an injury might be sustained. In the event of such an injury to my child, if I or my spouse cannot be contacted, I give permission to render such treatment as would be normal and agree to pay the usual charges for such treatment. I now release the Van Wert Parks & Recreation Dept. its elected officials, employees or volunteers from all claims resulting from any an all injuries sustained while participating in Little Sluggers. I give permission for my son/daughter to participate in the Van Wert Parks & Recreation Dept. Little Sluggers Program.

Parent/ Legal Guardian: _____ **Date:** _____

Picture Release

In the event that my son/daughter's picture is taken by the Van Wert Parks & Recreation Dept. I give permission for the picture to be released and used for news articles, city websites, and any other type of advertisement or promotional materials the Parks Dept. may develop.

Parent/Legal Guardian: _____ **Date:** _____

Mail form to: Van Wert Parks Dept
515 E Main St
Van Wert, OH 45891

Drop off at: Jubilee Park Office
137 Gleason Ave.
Van Wert, OH 45891