Parade of the Hills Athletic Day Registration Form

Child Name: _____**Age**:_____
Parent Name: _____
Address:_____**City**:_____
Email: _____**Phone**:_____

Release of Liability for Participants in POTH Athletic Day by Parent or Legal Guardian

_____ **(print child's name)** has my permission to participate in the Parade of the Hills Kids' Athletic Day.

I agree to hold Parade of the Hills, the City of Nelsonville, and Polley Field harmless in the event of injury to this child.

Furthermore, I agree that I will not bring, or permit to be brought, any claim or cause of action against Parade of the Hills, the City of Nelsonville, Polley Field, or any current, former, or future members, volunteers, employees, officers, or their heirs, executors, administrators, successors, and assigns, for any injury or damage that the participant and/or parent or legal guardian has had, now has, or may have in the future—whether known or unknown—that arises out of participation in these events.

I have read and fully understand the above release and waiver of liability, and I voluntarily sign it. I further acknowledge that no oral statements, representations, or promises other than those contained in this written agreement have been made.

I also agree to abide by all rules of good sportsmanship.

_____ _____
Printed Name of Parent or Legal Guardian Emergency Phone Contact

_____ _____
Signature of Parent or Legal Guardian Date

_____ _____
Signature of Participant Date