## Johnston Recreation Department - Youth Track and Field 2025



Please make check or money order payable to "Johnston Youth Sports"

**BOYS** 

Paid: _	Check/Money Order #	Cash	Date:	Received By	:
Player's Name:			Parent(s) Name(s):		
Address	:				
Street Email(s):			City/Town	Zip Code	
( )					ate last year?
	age as of April 1, 2025: P				
Does ch	aild have any medical problems tha	at the recreati	on departmer	it should be made aware	e of? Yes No
If yes, pl	lease explain:				
Please C	<b>circle</b> the t-shirt size you would	like:			
Youth S	outh Small Youth Medium (10-12)		n Large 16)	Youth X-Large (18-20)	
Adult Si (34-30		<b>Adult</b> (42-	Large (44)	Adult X-Large (46-48)	<b>Adult 2X-Large</b> (50-52)
0	<mark>Pptional:</mark> Add a JRD Track Sweat:	shirt for <u>an ac</u>	dditional \$28.0	00 Size:	Paid:
Would y	you be interested in coaching?	/es	No [If	yes, please fill out a <b>C</b> o	oaches Form]
position of	to the Rhode Island General Laws S on a Johnston Recreation Departmentities during the current season.				
further h	sume all risks and hazards incidental tereby release, absolve, indemnify, and supervisors, and/or all of them.				
supervisor from the officials.	of injury to my/our son/daughter, I/Vors appointed by them. I/We likewise activities. I/We will furnish a certifically acknowledge in the undersigned specifically acknowledge in the property of the contact of the contact exhibition or an activities.	e release from e ed birth certifi vledge that a ri	responsibility a cate of the abo sk of injury exi	ny person transporting m ve-named candidate upon sts and assume the risk w	y/our son/daughter to or the request of the league ith respect to practicing for
I authoriz	ze my child to participate in the 2024	Youth Track	and Field Prog	ram.	
				Demont /C	ardian Signature