# ATHLETE REGISTRATION FORM

#### ATHLETE INFORMATION

(Note: We require Middle Names because there are athletes with the SAME First and Last names.)

FIRST Name\* MIDDLE Name\* LAST Name\* Suffix

**DATE of BIRTH\* GENDER\* CELL** Phone **ALLOW** Phone Contact?

**PRIMARY** Sport: **SECONDARY** Sport (if Any):

## PARENT/GUARDIAN INFORMATION

#### **PRIMARY PARENT/GUARDIAN**

FIRST Name\* MIDDLE Name/Initial LAST Name\* Suffix

RELATIONSHIP to Athlete\* CELL Phone\* EMAIL Address:\*

**HOME** Street Address\* Apt/Suite/Letter

CITY STATE ZIP Code

#### **SECONDARY PARENT/GUARDIAN:**

FIRST Name MIDDLE Name/Initial LAST Name Suffix

**RELATIONSHIP** to Athlete **CELL** Phone **EMAIL** Address:

**HOME STREET** Address Same as Primary Parent/Guardian Apt/Suite/Letter

CITY STATE ZIP Code

## **IN CASE OF EMERGENCY** notify:

## MEDICAL INSURANCE, HEALTH & CONSENT INFORMATION

Is your child athlete COVERED under a HEALTH/MEDICAL INSURANCE Plan?\* YES

NO

If YES, enter name of MEDICAL INSURANCE Carrier:

INSURANCE Information: **GROUP** Number **POLICY** Number

#### PRIMARY CARE DOCTOR/PHYSICIAN:

**FIRST** Name **LAST** Name Suffix PHONE No.

**OFFICE** Street Address Suite/Floor

**CITY STATE ZIP Code** 

### **HEALTH INFORMATION:**

#### List any or all your Child's Health/Medical HISTORY:

List any physical and mental issues (Ex: allergies, asthma, diabetes, etc.). If None, Type "NONE" or "N/A"\*

## List any or all your Child's History of Injuries or Hospitalizations:

(If None, Type "NONE" or "N/A")\*

List any or all your Child's Medications and Dosages taken on a continual basis: (If None, Type "NONE" or "N/A")\*

List any or all your Child's Health Condition that require(s) attention during any sports activity: (If None, Type "NONE")\*

#### **Medical Consent\***

I/We, hereby grant consent to any and all health care providers designated by G8 Sports to provide my child athlete any necessary medical care as a result of any injury and/or illness. This consent includes First Aid and transportation to and from any health care provider.

## **WAIVER and RELEASE of LIABILITY**

G8 Sports Development Institute Incorporated, Inc., hereinafter referred to as G8 Sports, offers and conducts various athletic programs, events and activities that include, but is not limited to, individual and team sports training; organizing sports teams, and participation in sports leagues and/or tournaments. All athletic programs, events and activities are offered and conducted at designated sports facilities leased and/or used by G8 Sports.

In consideration of my/our child's participation or my participation in any G8 Sports programs, events and activities, I/We, hereby understand, acknowledge and agree:

- 1. That participation is voluntary.
- 2. To knowingly and freely assume all risks and financial responsibilities associated with my/our child's participation or my participation; agree to comply with any program or activities stated, reasonable and customary terms and conditions for participation; agree to observe any unusual or significant concern in my/our child's capacity or readiness for participation; and at my/our discretion, remove or stop my/our child from participation.
- 3. That in the course of participation, the potential, risk and seriousness of any injury or disease is always present and may be significant, which may cause or result in illness, temporary or permanent disability and/or even death.
- 4. G8 Sports makes a significant effort to follow and observe facility rules, equipment use, instill personal and personnel discipline that may help prevent or reduce injury, however, the potential for risk and seriousness of any injury still exists.
- 5. To indemnify and hold harmless, G8 Sports, its directors, officers, officials, partners, members, consultants, agents, employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of facilities or premises used to conduct such athletic programs, events and other activities, if I cause my own injury or my/our child athlete causes his or her own injury or injures someone else.
- 6. To indemnify and hold harmless, G8 Sports, its directors, officers, officials, partners, members, consultants, agents, employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of facilities or premises used to conduct such athletic programs, events and other activities, with respect to any and all injury, disability, death, or financial loss or damage to person or property.
- 7. That this a FULL and FINAL RELEASE of G8 Sports of any and all liabilities, including financial loss; incident to my/our child's involvement or participation in any G8 Sports athletic programs, events and activities, whether arising from the negligence of G8 Sports, its directors, officers, officials, partners, members, consultants, agents, employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers or otherwise, to the fullest extent permitted by law.
- 8. That I/We may transmit by facsimile transmission, by electronic mail in "portable document format" (.pdf) form, or by any other electronic means this document with the intent to preserve the original graphic and pictorial appearance of this document.

## Waiver and Release of Liability Consent\*

I/We agree, attest, accept and adhere to the terms and provisions of this Waiver and Release of Liability.

### FINANCIAL RESPONSIBILITY & AGREEMENT

G8 Sports offers and conducts individual sports training programs or team sports programs. Once an athlete and/or parent has accepted to participate in any G8 Sports Individual Sports Training program or team sports programs, registration must be immediately completed with the understanding of the terms and conditions outlined below:

- 1. I/We, the parent/guardian accepts full responsibility and agree to pay the full Individual Sports Training or Team program fee in the amount presented in this application or after an athletic evaluation and acceptance. I understand that these fees include: a one-time Registration Fee; the practice facilities; insurance and does not include miscellaneous fees that the I/We may agree to spend in addition to the original training or team fee amount.
- 2. Individual Sports Training and/or Team program fees paid are non-refundable.
- 3. All monthly fees may be paid through PayPal, debit card, check or cash. The Individual Sports Training and/or Team Fees are due on the FIRST day of each month.
- 4. The Registration fee is \$50.00 is payable upon registration and is non-refundable.
- 5. A late fee of \$25.00 will be charged if monthly payment is not received five (5) days after the due date, unless the due date falls on a weekend or federal holiday, in which case, the late fee would only be charged if the payment is not made by the next business day after the payment was due.
- 6. If a debit card transaction is not completed due to insufficient funds, a \$35.00 administrative fee will be assessed in addition to the payment due at the time.
- 7. If a parent/guardian and child athlete is delinquent on the payment, the child athlete will NOT be permitted participate in any Individual Sports Training or Team program activities until fees are paid.
- 8. If after 15 calendar days of the date the payment was due, and no payment has been received, you will be considered in default of this agreement and G8 Sports has the right to demand the immediate payment of the entire remaining unpaid balance, including any accrued late fees, unless satisfactory arrangements were made in advance of that 15-day period.
- 9. G8 Sports may take additional action to collect what is due and owed under this agreement, the parent/guardian will be responsible for all collection costs, including but not limited to all legal fees, court filing fees and other reasonable collection costs.

## **Financial Responsibility Consent\***

I/We agree, attest, accept and adhere to the terms and provisions of this Financial Responsibility Agreement.

### **SIGNATURES**

I/We agree, attest, that all the information contained herein are complete an accurate to the best of my/our knowledge. Furthermore, I/We agree to accept and adhere to the provisions of each section stated above and that this document was voluntarily and knowingly signed below without any form of inducement and that my/our electronic signature below will have the same effect as physical delivery of the paper document bearing my/our original signature, and shall have the same effect as an original for all intents and purposes.

Primary Parent/Guardian Signature	Date Signed	
Secondary Parent/Guardian Signature (Optional)	Date Signed	