



2023-24 Viper Skills Academy Registration Form

Fee for ALL AGES (8 sessions) - \$450

Tuesdays, 6:00-7:30 PM

A second day could be added, depending on # of players signed up.

12/5, 12/12, 12/19, 1/2, 1/9, 1/16, 1/23, & 1/30

NAME _____

Address _____

Parents Names _____ Parents Cell Phone _____

Parents Email _____

School _____ Age on 1/1/24 _____

Divisions: (circle one) U19 U16 U14 U12 U10

ASSUMPTION AND RELEASE OF LIABILITY. Contact sports are inherently dangerous. The undersigned, on behalf of the undersigned and the undersigned's child (collectively "Participant") hereby: (1) assume the risk of personal injury, illness due to bacteria or virus, Covid-19, property damage, or other loss (collectively "Injuries") to the Participant arising from or related to activities at the Viper Sports Club; (2), Viper Sports Club, BH Championship Sports, LLC, and its agents, employees, staff members, officers, directors and members (collectively "Viper Sports") from all liability, claims, or responsibility for Injuries to Participant; (3) grant permission for Participant to participate in activities at Viper Sports Club; and (4) release Viper Sports from Injury arising from any good faith acts or omissions in emergency situations. I authorize Viper Sports, its agents, employees, staff members, directors, and officers to take whatever action is necessary, in their best judgment, in an emergency and I hereby release discharge Viper Sports, its agents, employees, staff members, directors and officers from any responsibility or liability related there to.

I agree that you may photograph and/or videotape my child or me during sports activities and that you retain the right to use these visual images in future literature for Viper Sports Club without compensation to my child or me. I further agree that you may use my name, my child's name, or any testimonials made by us without limitation in advertising and promoting Viper Sports Club. I represent that I am over the age of 18 or a parent/guardian of the minor named below and agree that the grant and release contained therein binds me and the minor of all its terms.

Signature: _____

Make Check Payable to: Viper Field Hockey

Registration Deadline is December 4th.

Participants must bring their own stick, mouth guard, sneakers, shin guards.

PLEASE SUBMIT ALL REGISTRATION MATERIALS TO:

Viper Sports Club
832 N Lewis Rd
Limerick, PA 19468

For Additional Information or Questions, Email: viperfieldhockey@comcast.net

For Office Use Only	
Date Paid	_____
Check Number	_____
On Line	<input type="checkbox"/>
Amount \$	_____