

Zion Hill Free Will Baptist Church
3064 Zion Hill Road, Millwood, Georgia 31552
NIKAO SPORTS PLAYER REGISTRATION FORM
Children's Basketball League

Name: _____ Gender: _____ Age: _____ DOB: _____

Address: _____

City, State, ZIP: _____

Home Phone: _____ Cell Phone: _____

Jersey Size: _____ Shorts Size: _____

Emergency Contact Name/Number: _____

Are there any medical conditions and/or allergies coaches need to be aware of? _____

List medical conditions and/or allergies here: _____

Medical/First Aid Waiver

I, the Parent/Legal Guardian of the above-mentioned child, hereby give permission for any and all medical attention to be administered to my child, including ambulatory service, in the event of accident, injury, sickness, etc., if I cannot first be contacted. I also assume the responsibility for the payment of any such treatment. This release is effective for the remainder of the 2013-2014 season. Initial here _____

Waiver/Hold Harmless Agreement

We hereby agree that the Zion Hill Free Will Baptist Church and its Nikao Sports Program, coaches, referees, affiliates, subsidiaries, volunteers, or designates of any kind shall not be liable for any injury or loss in which my child may sustain while participating in activities of any kind, whether sponsored by or under the supervision of the Nikao Sports Program, and we agree to release, indemnify, and to hold harmless the Nikao Sports Program, its members, coaches, officers, referees, affiliates, subsidiaries, volunteers, or designates of any kind, from any claim whatsoever. Initial here _____

Media/Photo Waiver

I hereby agree that by participating in Zion Hill's Nikao Sports Program athletics and recreation, I give permission and/or rights to have my child's picture taken for Nikao Sports Program events, sanctioned events, social media, websites, annuals, picture programs, and etc. Please circle one: YES NO Initial here _____

***Note:** If you feel that you cannot agree to this please contact the Nikao Sports Program Director to ensure photos of your child are not used. Refusal of the Media/Photo Waiver will in no way prohibit your child from participating in Nikao Sports Programs.*

\$25 Registration Fee (includes jersey, shorts, and season trophy)

Amount Paid: _____ Received By: _____

I hereby register my child to participate as a player in the Nikao Sports Program and agree to all legal and medical waivers as stated and initialed above:

Parent / Legal Guardian, print name: _____

Parent / Legal Guardian, signature: _____