

Town of Sterling, Connecticut
Sterling Recreation Authority Application
1183 Plainfield Pike PO Box 157
Oneco, CT 06373
860-564-2136

Program: Youth Basketball / Drill Program k-2

GRADE:

Name of Participant: _____ (Male or Female) Shirt size: _____
please circle

Mother and Father: _____

Address: _____ Email: _____

Home phone: _____ Cell Phone (s): _____

Please list any medical issues participant currently has and/or are being treated for:

Please list any medications participant is currently taking: _____

PERSON TO CONTACT IN CASE OF AN EMERGENCY:
Name: _____ Relationship: _____

Phone Number (s): _____

Please note: Refunds are given up to 2 weeks prior to the start of the class/program. Credit will be given for cancellations due to a medical reason with and accompanied by a doctor's note. This credit will enable you to attend the next scheduled session you are physically able to attend. The Sterling Recreation authority reserves the right to cancel any class due to lack of participation.

***You must read and sign the attached Waiver, Hold Harmless and Release of Liability Agreement in order to participate in any program offered by the Town of Sterling Recreation Authority.**

Payment: Amount \$ _____ Check # _____ or Cash Amt _____

Emergency release: I give permission for the Town of Sterling to utilize any medical emergency services that may be needed to treat my child for an injury that could occur. We will make a reasonable effort to contact you of this event. Signed _____

The undersigned hereby agrees to the following:

I, for myself and for my heirs, assigns, successors, executors, administrators and legal representatives, **AGREE TO DEFEND, INDEMNIFY AND HOLD HARMLESS THE TOWN OF STERLING AND THEIR AGENTS, SERVANTS OR EMPLOYEES** from any and all claims, suits or demands by anyone arising from my use of the **TOWN OF STERLING** facilities and equipment **including CLAIMS OF NEGLIGENCE ON THE PART OF THE TOWN OF STERLING AND THEIR AGENT, SERVANTS OR EMPLOYEES.**

1. I understand that there are inherent risks involved in the **activity of youth basketball I am signed in for**, including the risk of serious physical injury or death and **I FULLY ASSUME ALL RISKS ASSOCIATED WITH** these activities, **EVEN IF DUE TO THE NEGLIGENCE OF STERLING RECREATION AUTHORITY AND THEIR AGENTS, SERVANTS OR EMPLOYEES**, including but not limited to collisions while transporting, contact from patrons and spectators; equipment failure; lack of safety devices or inadequate safety devices; lack of warning or inadequate warnings; lack of instruction or inadequate instruction; and the like.

2. I, for myself and for my heirs, assigns, successors, executors, administrators and legal representative, **HEREBY RELEASE, AND AGREE THAT I WILL NOT SUE THE TOWN OF STERLING AND THEIR AGENT, SERVANTS, OR EMPLOYEES** for money, damages for personal injury sustained by me while using the **TOWN OF STERLING** facilities and equipment **EVEN IF DUE TO THE NEGLIGENCE OF THE TOWN OF STERLING AND THEIR AGENTS, SERVANTS OR EMPLOYEES.**

I HAVE READ THIS WAIVER, HOLD HARMLESS AGREEMENT AND RELEASE OF LIABILITY AND FULLY UNDERSTAND ITS TERMS. I FURTHER UNDERSTAND THAT BY SIGNING THIS AGREEMENT THAT I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS. I HAVE NOT BEEN INDUCED TO SIGN THIS AGREEMENT BY ANY PROMISE OR REPRESENTATION, AND I SIGN IT VOLUNTARILY AND OF MY OWN FREE WILL.

Consent of Parent or Guardian

This is to certify that I, as parent or guardian with legal responsibility for this participant, do hereby consent and agree to his or her release as set forth above and for myself my heirs, assigns, successors, executors, and administrators, and legal representatives, **AGREE TO DEFEND INDEMNIFY AND HOLD HARMLESS THE TOWN OF STERLING AND THIER AGENT, SERVANTS OR EMPLOYEES** from any and all claims, suits or demands by anyone arising from said participants use of the **TOWN OF STERLING** facilities and equipment **INCLUDING CLAIMS OF NEGLIGENCE ON THE PART OF THE TOWN OF STERLING AND THEIR AGENTS, SERVANTS OR EMPLOYEES.**

Participant's name

Parent or Guardian : PRINT NAME

Parent or Guardian Signature

Date