

TOWN OF SUMMERVILLE PARKS & RECREATION

2016 ULTIMATE FRISBEE REGISTRATION FORM

Gender: Male Female Date of Birth: ____ / ____ / ____ Height: _____

Player's Legal Name _____
Last First M.I.

Cell Phone: _____ Email Address: _____

Street Address: _____ City: _____

State: _____ Zip Code: _____ Adult Shirt Size: _____

SELF-ASSESSMENT:

ATHLETICISM

- 5 – **Excellent** – Well-conditioned athlete who can get open consistently.
- 4 – **Very Good** – Competitive athlete in good physical shape who can get open most of the time.
- 3 – **Good** – In good condition but do not have the speed to always get open.
- 2 – **Average** – Fair conditioning and have difficulty getting open.
- 1 – **Fair** – Not very athletic. Not in very good shape.

SKILLS

- 6 – **Excellent** – Can make just about any throw at any distance. Can call/teach offensive & defensive plays.
- 5 – **Very Good** – Can consistently make throws and understands both offense and defense.
- 4 – **Good** – Can throw both forehand/backhand and understands the basics of the game.
- 3 – **Average** – Can throw both forehand/backhand but with limited confidence and limited knowledge of game.
- 2 – **Fair** – Just learned how to throw or can only throw forehand or backhand. Not familiar with offense/defense.
- 1 – **New** – Have not played or just started playing. Does not understand game but wants to learn and have fun.

EXPERIENCE

- 4 – National/Regional Club Level
- 3 – Sectional Club, College, or 1-3 years of League Play
- 2 – Pick-up player with less than 3 years of experience
- 1 – New player – never played or just tossed a frisbee.

AVAILABILITY

- 10-12 Games
- 7-9 Games
- 4-6 Games
- 1-3 Games

I will _____ will not _____ be available for the Post Season Tournament.

OVERALL PLAYER RATING:

To Be Completed by Parks & Recreation Staff

BUDDIES:

You have the option of choosing one buddy to be placed on a team with you. If you and your buddy each choose each other and sign up by the deadline, you will play on the same team. Both buddies will be marked received when the second (2nd) registration arrives. Parks & Recreation Staff reserves the right to review buddies and make adjustments based on the basis of competitive equity.

I would like my buddy to be: _____

FOR OFFICE USE ONLY ___ Resident Date: ____ / ____ / ____ Amount Paid: \$40.00 Receipt #: _____
 ___ Non-Res Form of Payment: CK _____ M.O. _____ CASH Credit Card

RELEASE OF LIABILITY FOR ADULT PARTICIPANTS (18 YEARS & OLDER)

IN CONSIDERATION OF my being allowed to participate in any way in the Town of Summerville Parks & Recreation program and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury to myself from the activities involved in these programs is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I myself HEREBY RELEASE THE other participants, the Town of Summerville, its officers, directors, administrators, employees, volunteers, and agents, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leasers of premises used to conduct the event (HEREIN AFTERWARDS REFERRED TO AS "RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law; and,
3. FOR MYSELF, I KNOWINGLY AND FREELY ASSUME ALL RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
4. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my readiness for participation and/or in the program itself, I will remove myself from the participation and bring such attention of the nearest official immediately; and,
5. I, for myself, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities, claims, demands, losses, damages, or costs, including attorney fees incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PARTICIPANT'S SIGNATURE	PRINTED NAME	DATE
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RELEASE OF LIABILITY FOR MINOR PARTICIPANTS (17 YEARS & YOUNGER)

IN CONSIDERATION OF my minor child/ward ("my child") being allowed to participate in any way in the Town of Summerville Parks & Recreation program and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury to my child from the activities involved in these programs is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I myself, my child, my child's other parent and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE THE other participants, the Town of Summerville, its officers, directors, administrators, employees, volunteers, and agents, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leasers of premises used to conduct the event (HEREIN AFTERWARDS REFERRED TO AS "RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law; and,
3. FOR MYSELF, MY CHILD, AND MY CHILD'S OTHER PARENT, I KNOWINGLY AND FREELY ASSUME ALL RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation; and,
4. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from the participation and bring such attention of the nearest official immediately; and,
5. I, for myself, my child, my child's other parent and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities, claims, demands, losses, damages, or costs, including attorney fees incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.
6. I have legal authority and permission from my child's other parent to sign this document. If signing as the child's guardian, I have been designated as such by Judge of a Family Court in the State of South Carolina. I represent that there is no Court Order that would prevent me from signing this release.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PARENT/GUARDIAN SIGNATURE	PRINTED NAME	DATE
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