

# Clash of the Heightans, April 17, 2017 - Registration

## (Dodgeball, Tug-of-War, Kickball + Individual/Dual Sports)

Activity # 1617.200

**ELIGIBILITY:** PARTICIPANTS MUST RESIDE IN OR ATTEND A PUBLIC OR PRIVATE SCHOOL LOCATED WITHIN THE BOUNDARIES OF THE BEREA CITY SCHOOL DISTRICT OR HAVE A CURRENT MEMBERSHIP AT THE MIDDLEBURG HEIGHTS COMMUNITY CENTER, AND BE BETWEEN AGE 10-15 AT THE TIME OF THE EVENT

You may register as a team or individually. If you register as a team, please provide your team name and a list of the members on the team. Each team member must fill out a registration form with a parent or guardian signature. If registering as an individual, teams will be selected the day of the event.

Name \_\_\_\_\_ DOB \_\_\_\_\_ Age on 4/17/17 \_\_\_\_\_ School \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Phone# \_\_\_\_\_

E-Mail \_\_\_\_\_ Father \_\_\_\_\_ Mother \_\_\_\_\_

**Shirt Size(circle one):** YS    YM    YL    AS    AM    AL    AXL    AXXL

**Only complete this section if registering as a team.**

Team Name \_\_\_\_\_ Members 1 \_\_\_\_\_ 2 \_\_\_\_\_

3 \_\_\_\_\_ 4 \_\_\_\_\_ 5 \_\_\_\_\_ 6 \_\_\_\_\_

**PARENTAL WAIVER:** In consideration of being allowed to participate in the above named activity, I agree to hereby release, discharge, and/or otherwise indemnify the City of Middleburg Hts., the Middleburg Hts. Recreation Department, it's affiliated organizations, sponsors, employees and volunteers against any claim by or on behalf of myself( or the registrant if under 18) that may occur as a result of this activity. I understand and accept the inherent risks of such an activity and acknowledge that I am (or the registrant if under 18) is physically able to perform this activity. Any mistake made by a parent or staff as to league or program placement will not be allowed to stand and will be corrected at the discretion of the Athletic Director. If a division does not have enough players, efforts will be made to accommodate players or a refund may be granted.

I have read and agree to all of the above terms

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Registration Fees:** \$10 per player, due at the time of registration. Register by 4/9/17 to guarantee a t-shirt. Make checks payable to Middleburg Heights Recreation. Each member, if registering as a team, needs to complete a registration form. Please return this completed form and payment to the Middleburgh Heights Community Center to complete registration. Check-in for registered participants will be at 8:30am on 4-17-17 at the Middleburg Heights Community Center.

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For office use only

Staff \_\_\_\_\_ Rec'd Date \_\_\_\_\_ Amount Paid \_\_\_\_\_ Receipt# \_\_\_\_\_