

YOUTH PROGRAM WAIVER

Town of Lancaster Parks & Recreation Department
525 Pavement Road
Lancaster, NY 14086
684-3320

_____ Boys Basketball League Ability Level ____ (1-5 5=best) Height _____
(check one)
Bantam (6-7-8 years old) (check one) 11am-12noon _____ or 12noon-1pm _____
Midget (9-10-11 years old) _____ (play between 1pm and 4pm)
Junior (12-13-14 years old) _____ (play between 10:15am & 1pm)
Senior (15-16 years old) _____ (play between 1:15pm & 2:30pm)
Play each week is approximately 1 – 1 ½ hrs. per week

Participant's Name _____

Street _____ Town _____

Zip Code _____ Phone # _____

Date of Birth _____ Age _____

Shirt Size (circle one) **(Child Sizes)** S M L
 (Adult Sizes) S M L XL

Waiver In Case of Injury

As the parent/guardian of the above participant, I hereby volunteer to relinquish any right to claim against the Town of Lancaster, the Lancaster Parks & Recreation Department or its elected officials or employees, any damages to property or personal injury that may be incurred or suffered during participation in scheduled games or in the practices taking place on the designated fields, etc.. used by the program, unless such damage to property or person shall be incurred or suffered through the negligence of the Town of Lancaster or the Lancaster Parks & Recreation Department and its elected officials, employees or appointees.

I, the parent/guardian of the above mentioned player, give my permission for my son/daughter to participate in the above mentioned activity and fully understand the stipulations of the contract.

Parent/Guardian
Signature _____ Date _____