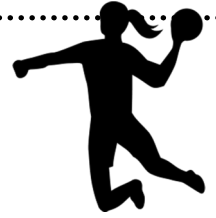


Team Name: _____



12th Annual Dodgeball Tournament and Toy Drive



Please fill out one form per player and return to Poricy Park Nature Center (345 Oak Hill Road) or email to recreation@middletownnj.org. Players CANNOT practice or participate in tournament without a completed wavier. All waivers must be turned in by Tuesday, November 30th. Incomplete forms will be delayed in processing.

Player Information		
Player's Name: _____	Date of Birth: _____	Age: _____
Team Name: _____	Division: _____	
Player's Address: _____		
<small>Street</small>	<small>Town</small>	<small>ZIP</small>
Parent / Guardian Information		
Parent / Guardian Name: _____	Relationship to Child: _____	
Phone Number: _____	Email Address: _____	
Street Address: _____		
<small>If different from above</small>		
Emergency Contact <i>In case of emergency, please call:</i>		
Name: _____	Relationship to Child: _____	
Phone Number: _____	Alternate Phone: _____	
Player's School Information		
School Name: _____	Town: _____	Grade: _____

I verify that the information written on this form is correct and accurate to the best of my knowledge. I hereby agree to indemnify and save harmless the Middletown Township Department of Recreation, its employees, and its volunteers from any and all liability arising out of accident as a result of participation in the Annual Dodgeball Tournament and Toy Drive. I hereby give permission for the Township of Middletown to use, in its future brochures and any other publicity and/or broadcasts of any kind, and program pictures, audio, or video in which I (or my child/ward) appear.

Parent/Guardian Signature

Date

