



**Johnston Recreation Department
Coed Middle School Volleyball Program – Fall 2021**

Recreation Use: Paid: Check/Money Order # _____ Cash Date: _____ Received By: _____

Player's Name: _____ Parent(s) Name(s): _____

Address: _____
Street City/Town Zip Code

Phone No: _____ Email: _____

Date of Birth: _____ Age as of Sept. 1st, 2021: _____ Grade as of Sept. 1st, 2021: _____

Does child have any medical problems that the recreation department should be made aware of? Yes No

If yes, please explain: _____

Please **circle** the cotton shirt size you would like:

- | | | | |
|-------------------|--------------------|-------------------|----------------------|
| Youth Small 6-8 | Youth Medium 10-12 | Youth Large 14-16 | |
| Adult Small 34-36 | Adult Medium 38-40 | Adult Large 42-44 | Adult. X-Large 46-48 |

I authorize my child to participate in the 2021 Fall Coed Middle School Volleyball Program. I agree to follow all safety & health guidelines and will monitor my child for COVID-19 symptoms.

Parent's Signature

Johnston Recreation Department – Recreation Activities: Pursuant to the Rhode Island General Laws S7-6-22, I/we the parent(s) of the above named boy/girl, who is a candidate for a position on a Johnston Recreation Department Activity, hereby give my/our approval to his/her participation in any and all of the activities during the current season.

I/we assume all risks and hazards incidental to the conduct of the activities and transportation to and from the activities; I/we do further hereby release, absolve, indemnify and hold harmless the Johnston Recreation Department, the organizers, sponsors, and the supervisors, and or all of them.

In case of injury to I/we hereby waive all claims against the organizers, the sponsors, or any of the supervisors appointed by them. I/we will furnish a certified birth certificate of the above named candidate upon request of the league officials.

The undersigned specifically acknowledge that a risk of injury exists and assume said risk with respect to practicing for or participating in any contact or exhibition or an athletic or sports matter sponsored by the Johnston Recreation Department.

Parent/Guardian Signature: _____