Rainy River Rec. Centre Youth Sport Leagues Registration Form

Time Clock	Monitoring	On the Ice (Coaching/Ref)	Team Leader (organizing volunteers for your age group)
(Please circle whe	ere you would like to v	rolunteer) at least one	please
Home Phone #:		Work or Cell#:_	
Name:			
Second Emergend (Other than pare	cy Contact Informatio nts)	n	
Home Phone #:		Work or Cell #:	
Father's Name:			
Home Phone #:		Work or Cell #:_	
Mother's Name:			
Parents/Guardia	n Contact Information	I	
Allergies or Health			
Email (please prin	t):		
Would you like to	be contacted by email?		
Phone #:			
Township:			
Age:	Grade:	Date of Birth:	
First and Last Nan	ne of Player:		

Waiver and Indemnity

To: Rainy River Recreation Board

I, _______, agree to waive and release any (Parent/Guardians name) any claims or demands I may have against the Rainy River Recreation Board, Township, and its' officers, directors, employees, agents, volunteers and contractors from any and all damage, injury or claims due to my child participating in all youth sports leagues run by the Recreation Board, which I or anyone claiming through or against me may have, and I further agree to indemnify and hold harmless the same persons for any claims made as a result of my child's participation, however and in what manner such claims may arise.

Dated at Rainy River, Ontario this _____day of November, 2020.

If the participant is under 18 years of age, the persons parent and/or guardian signs below on behalf of the minor and on their own behalf as to waiver and indemnity on the terms stated above.

Witness

Parent or Guardian Signature



Born 2013 and after - \$275

All other skaters - \$300