

WHY

IMPACT⁺ SPORTS

- Your child will learn the game of football in a safe and Christian environment.
- Registration fee for each participant covers cost for jersey, team pictures, league administration and closing celebration.
- Location of league is at Willow Ridge Church located off of Highway 1.
- There will be one practice per week and one game on Saturday.

IMPACT⁺ SPORTS



**Every Child
A Winner!**

Impact Sports
is a Recreation Program of Willow Ridge Church

For more information call:
803.808.7771

IMPACT⁺ on the field

- Every child will learn teamwork.
- Every child will play.
- Every child will experience fast and fun competition.
- Every child will discover self confidence.

IMPACT⁺ with your child

- Christian relationships are developed.
- Godliness is created.
- Kindness is encouraged.
- Values are valuable.
- Respect is instilled.
- Sportsmanship is ingrained.

IMPACT⁺ in the community

- Where support isn't taken for granted.
- Where everyone is invited to participate and play.
- Where lives are changed.



2010 REGISTRATION FORM

REGISTRATION INFORMATION:

Registration begins August 1.
Register at Willow Ridge Church
Monday to Thursday from 9:30 AM
to 4:00 PM or mail to:

Willow Ridge Church
104 Sycamore Tree Rd
Lexington SC 29073

The early registration cost per
child is \$50; after 8/22/10, the
cost is \$65. Registration ends on
8/29/10. Please make checks
payable to Willow Ridge Church.

*Players on all teams need to wear
black shorts.*

AGE DIVISIONS:

6-9 year olds (Coed)
10-13 year olds (Coed)
14-17 girls only
14-17 boys only
Age determination is September 1

PRACTICES AND GAMES:

All practices and games will take
place at the Willow Ridge field.

LEAGUE SCHEDULE:

Practice begins September 6th.

First game September 18th.

Last game November 6th

Closing Celebration TBA

FOR MORE INFORMATION CALL:

Willow Ridge Church
803.808-7771

PARTICIPANT INFO:

Last Name _____ First Name _____ MI _____

Date of Birth _____ Present Grade _____ Gender(M/F) _____

Address _____ City _____ Zip _____

Home Phone _____ Parent's Email _____

Jersey Size (circle one): YS YM YL YXL/AS AM AL AXL A2X

Player Information Notes (if any) _____

How many years has your child played organized football? _____

What Church do you regularly attend: _____

Medical History: _____

Medical Conditions: _____

Allergies: _____

Medications: _____

PARENT / GUARDIAN INFORMATION:

Father / Guardian _____

Work Phone _____ Cell Phone _____

I would like to assist by being a: coach team parent

Mother / Guardian _____

Work Phone _____ Cell Phone _____

I would like to assist by being a: coach team parent

If parent(s) can't be contacted, emergency contact _____

Phone _____

PAYMENT (OFFICE USE ONLY)

Paid On: _____ Amount: _____

Payment Type: CASH CHECK (Check #: _____)

**PLEASE READ CAREFULLY AND SIGN BELOW
TO INDICATE YOUR AGREEMENT**

RELEASE OF LIABILITY FOR MINOR PARTICIPANTS

IN CONSIDERATION OF my child/ward, (child listed on this registration
form) being allowed to participate in any way in the IMPACT SPORT
PROGRAM sponsored by Willow Ridge Church related events and
activities, the undersigned acknowledges, appreciates, and agrees that:

The risk of injury to my child/ward from the activities involved in these
programs is significant, including the potential for permanent
disability and death, and while particular rules, equipment, and
personal discipline may reduce this risk, the risk of serious injury
does exist; and,

I FOR MYSELF, SPOUSE, AND CHILD/WARD, I KNOWINGLY AND FREELY
ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF
ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and
assume full responsibility for my child/ward's participation; and,

I willingly agree to comply with the program's stated and customary
terms and conditions for participation. If I observe any unusual
significant concern in my child/ward's readiness for participation
and/or in the program itself, I will remove my child/ward from the
participation and bring such attention of the nearest official
immediately; and,

I for myself, my spouse, my child/ward, and on behalf of my/our heirs,
assigns, personal representatives and next of kin, HEREBY RELEASE
AND HOLD HARMLESS IMPACT SPORTS, Willow Ridge Church, its
directors, officers, officials, agents, employees, volunteers, other
participants, sponsoring agencies, sponsors, advertisers, and if
applicable, owners and lessors of premises used to conduct the
event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY,
DISABILITY, DEATH, or loss or damage to person or property
incident to my child/ward's involvement or participation in these
programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE
RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I, for myself, my spouse, my child's/ward, and on behalf of my/our
heirs, assigns, personal representatives and next of kin, HEREBY
INDEMNIFY AND HOLD HARMLESS all the above Releasees from any
and all liabilities incident to my child's/ward involvement or
participation in these programs, EVEN IF ARISING FROM THEIR
NEGLIGENCE, to the fullest extent permitted by law.

UNDERSTANDING OF RISK

I understand the seriousness of the risks involved in participating in this
program, my personal responsibilities for adhering to rules and
regulation, and accept them as a participant.

CONSENT TO MEDICAL TREATMENT

In the event my child is injured or becomes ill, and I (or parent or
guardian) is not available. I authorize IMPACT SPORTS and Willow Ridge
Church to arrange for and consent on my behalf to emergency medical
and dental care and treatment.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK
AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I
HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT
FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

(PARENT/GUARDIAN SIGNATURE)

(PRINT NAME)

Date Signed: _____