

# GOLD CAL JRS VBC

2011 CLINIC REGISTRATION FORM

[www.goldcaljrsvbc.com](http://www.goldcaljrsvbc.com)

For office use only

Amount Pd \_\_\_\_\_

Check # \_\_\_\_\_

Date \_\_\_\_\_

**Sunday, September 25<sup>th</sup>- Clinic**  
3:30-5:30pm 5<sup>th</sup> grade & older \_\_\_\_\_  
**Sunday, October 2<sup>nd</sup>- Clinic**  
3:30-5:30pm 5<sup>th</sup> grade & older \_\_\_\_\_  
**Sunday, October 9<sup>th</sup>- Clinic**  
3:30-5:30pm 5<sup>th</sup> grade & older \_\_\_\_\_  
**Sunday, October 16<sup>th</sup>- Clinic**  
3:30-5:30pm 5<sup>th</sup> grade & older \_\_\_\_\_  
**Sunday, October 23<sup>th</sup>- Clinic**  
3:30-5:30pm 5<sup>th</sup> grade & older \_\_\_\_\_  
**Sunday, October 30<sup>th</sup>- Clinic**  
3:30-5:30pm 5<sup>th</sup> grade & older \_\_\_\_\_  
**Sunday, November 6<sup>th</sup>- Clinic**  
3:30-5:30pm 5<sup>th</sup> grade & older \_\_\_\_\_

Bring signed waiver to clinic. One form per participant.

**FOLSOM SPORTS COMPLEX - LARGE GYM 3 COURTS**  
**66 CLARKSVILLE ROAD FOLSOM, CA**  
**\$20 per clinic (Cash or Checks payable: Gold Cal Jrs VBC)**

## REGISTRATION

PLAYER'S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ DOB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ GRADE: \_\_\_\_\_ POSITION PLAYED: \_\_\_\_\_

CLUB EXPERIENCE: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

## RELEASE & INDEMNITY

In consideration for being permitted by Gold Cal Jrs VBC and the city of Folsom in conjunction with Folsom Sports Complex to participate in the above activities. I hereby waive, release and discharge any and all claims for damages for personal injury, death or property damage which I or my child (if participating) may have, of which hereafter accrue to me or my child, against Gold Cal Jrs VBC as a result of my or my child's participation in the activities. This release is intended to discharge Folsom Sports Complex, Gold Cal Jrs VBC and the City of Folsom, its officers, officials, employees and volunteers, and any other involved public agencies from and against any and all liability arising out of or connected in any way with my or my child's participation in the activity, even though that liability may arise out of the negligence or carelessness on the part of the person(s) or agency mentioned above. I further understand that accidents and injuries can arise out of the activities; knowing the risks, nevertheless, I hereby agree to assume those risks and to release and to hold harmless all of the persons or agencies mentioned above who throughout negligence or carelessness might otherwise be liable to me, or my child or immediate family for damages. It is further understood and agreed that this waiver, release and assumption of risk is to be binding of my and my child's immediate family. In addition, I agree to indemnify and hold harmless Folsom Sports Complex, Gold Cal Jrs VBC and the City of Folsom, its officers, employees and volunteers from and against all claims, damages, losses and expenses including attorney fees arising out of my or my child's participation in the activities described above, caused in whole or in part by my child's negligent act, except where caused by the active negligence, sole negligence or willful misconduct of Gold Cal Jrs VBC, the City of Folsom and Folsom Sports Complex. I HAVE CAREFULLY READ AND UNDERSTAND THE ABOVE RELEASE AND INDEMNITY AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND AGREEMENT TO INDEMNIFY GOLD CAL JRS, FOLSOM SPORTS COMPLEX AND THE CITY OF FOLSOM AND I SIGN IT OF MY OWN FREE WILL.

\_\_\_\_\_  
Signature of parent or guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of parent or guardian

\_\_\_\_\_  
Signature of participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of participant