

METUCHEN YMCA TRACK & FIELD

April 18th—June 20th, 2020



PARTICIPANT INFORMATION

Name _____ Age _____ M F
Address _____ D.O.B. _____
City _____ State _____ Zip Code _____

PARENT/LEGAL GUARDIAN INFORMATION

Name _____
Cell Phone _____
Home Phone _____
Work Phone _____
Valid E-mail _____

*It is very important to provide a current and valid E-mail address for at least one parent or guardian, as this is our main form of communication. You will receive weekly updates for all sports programs, including weather and emergency closing announcements.

CIRCLE YOUR CHILD'S TSHIRT SIZE

YS YM YL AS AM AL AXL A2XL

EMERGENCY CONTACT

Name _____ Relationship _____
Cell Phone _____ Home Phone _____

EMERGENCY CONSENT AGREEMENT

I grant permission and authorization to the Metuchen Branch YMCA for the following...

- An accident to my child will be treated on the premises of the program by YMCA staff.
- I understand that I will be notified as soon as possible of any incident, and will be responsible to pick up my child or send a responsible person to do so.
- Emergency treatment for my child will be obtained in my absence by YMCA staff for whatever is deemed necessary to protect the life, health and well being of my child.
- Transportation by any means necessary to obtain medical care or assistance for my child, as circumstances may require, at the discretion of YMCA staff is hereby authorized.

Signature of Parent/Legal Guardian

Date

Questions?

Marcus Farris — Sports Coordinator
(P) 732 548 2044 ext. 2234 (E) Marcus.Farris@ymcaofmewsa.org