

November 9's - Registration Form

Name

School Attending

Date of birth

Age

Grade in school

e-mail address

or

text message

Emergency Information

Contact Name: _____

Contact Phone Number: _____

Insurance Provider: _____

Policy Number: _____

I give my permission for _____ to participate in the Ultimate Tournament that will be held at South Garland High School in Garland, TX on November 21st from **9am-4pm**.

I understand that *Texas, Ultimate!* does not provide accident and hospitalization insurance, and there is some inherent risk or danger in participating in Ultimate activities. I do not hold *Texas, Ultimate!* liable for accident or injury resulting from participation in the skills clinic and hat tournament. I give *Texas, Ultimate!* permission to use my player's image in it's promotional materials including, but not limited to, brochures, ads, and website. I understand my child's name will never be used in conjunction with their image.

Cost is \$9 per player. Checks may be made to TEXAS, Ultimate! Players should pack a sack lunch, a light shirt and a dark shirt in school colors. Please wear appropriate footwear (cleats are recommended) and bring a refillable water container. We will provide a morning snack, drinking water, lush playing fields, and a full day of Ultimate activities.

Signature of Parent/Guardian

Date

I promise to participate fully, respecting the rules of the sport of Ultimate and letter of the *Spirit of the Game*.

Signature of Player

Date