

Zilker 2012 Ultimate Frisbee - WEDNESDAY Registration Form

Date of birth	Age	Grade in school
		Zilker Elementary School
Name	School Attending	

E-mail: _____

Emergency Information

Contact Name: _____

Contact Phone Number: _____

Insurance Provider: _____

Policy Number: _____

I give my permission for _____ to participate in the Zilker After-School Ultimate Program that will be held from 2:48pm - 4:15pm on Wednesday Afternoons. Classes meet February 15th through March 27th on the Zilker Elementary Playground.

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 after school program.

Further, I give Texas, Ultimate! permission to use my child's image in it's promotional materials including, but not limited to our website. I understand my child's name will never be used in conjunction with their image.

Cost is for the session is \$70 * per player. Each player receives a great playing experience and a healthy snack each week. Perfect attendance will be rewarded with an Ultimate disc.

* Scholarships (full and partial) are available to players in need.

Please inquire to 512-468-0484 or ultimatespirit.org@gmail.com.

Please, mail completed registration and payment to: Texas, Ultimate! PO Box 3567 Austin, TX 78764-3567 or bring paperwork to the first class meeting. Checks may be made payable to **Texas, Ultimate!**

Signature of Parent/Guardian

Date