



T-SHIRT

2021 SPRING DEVELOPMENTAL

New Member Renewal

LAST YEAR'S TEAM

First Name	Middle	Last Name
Address	Birth Date	
City	State	Zip
Phone #	Email	

School	Grade	Male/Female
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Mother Name	Phone #	Email
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Father Name	Phone #	Email
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Emergency Contacts: Must be different than parents or guardians

Name	Phone
Name	Phone

Medical Information:

Doctor's Name	Doctor's Phone
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List any allergies or medical conditions

Recognizing the possibility of injury associated with soccer and in consideration for the Ironbound Boys and Girls Club and its affiliates accepting the registrant for its soccer programs and activities (the "Programs") I hereby release, discharge, and/or otherwise indemnify the Ironbound Boys and Girls Club, its affiliated organizations and sponsors, their employees, volunteers, and associated personnel, including the owners of the fields and facilities to and from the same, which transportation I hereby authorize. My child has received a physical examination by a physician and has been found capable of participating in the programs. The Ironbound Boys and Girls Club is not responsible or liable in any way in the event of harm or injury occurring to the participant. It is agreed that the parent or guardian does file a complaint against the club, the parent or guardian agrees to pay the Club's legal fees.

Therefore, I grant _____ and/or _____ permission to act as my surrogate for my child in the area of obtaining medical treatment by a doctor of medicine and dentistry. I also assume the financial responsibility for any medical treatment for my child. Further, I, on behalf of myself, my son/daughter/ward, and our heirs, executors, administrators, assigns, and representatives, hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT-TO-SUE Ironbound Boys and Girls Club, its member organizations (the Programs) and sponsors, their directors, officers, employees, associated personnel, and volunteers, including the owner of fields and facilities utilized for the Programs (hereinafter collectively, the "Releasees"), and hereby indemnify and hold harmless the Releasees from and against any and all liability, claims, demands, actions, and causes of action whatsoever, arising directly or indirectly out of, related to, or as a result of any loss, damage or injury, including but not limited to, death, that may be sustained by or on behalf of my player son/daughter/ward as a result of my son's/daughter's/ward's participation in the Programs and/or being transported to or from the Programs, which transportation I hereby authorize, whether such claims are caused in whole or in part by the negligence, gross negligence or other act, omission or conduct on the part of Ironbound Boys and Girls Club or its members or otherwise. In consideration of my son/daughter/ward being allowed to participate in any way in the Programs, related events and activities, I, the undersigned, on behalf of myself, son/daughter/ward, and our heirs, executors, administrators, assigns, and representatives, hereby acknowledge, appreciate, and agree that I am aware there are risks to myself and my son/daughter/ward of exposure to directly or indirectly arising out of, contributed to, by, or resulting from an outbreak of any and all communicable disease, including but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19), and/or any mutation or variation thereof, and I, for myself and on behalf of my son/daughter/ward, our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, WAIVE, INDEMNIFY, AND HOLD HARMLESS Ironbound Boys and Girls Club and the Releasees from any and all claims, demands, losses, and liability arising out of or related to any illness, injury, disability or death related to COVID-19 that I or my son/daughter/ward may suffer, WHETHER ARISING FROM THE NEGLIGENCE OF Ironbound Boys and Girls Club OR THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. On behalf of my son/daughter/ward, myself, and our heirs, executors, administrators, assigns, and representatives, I hereby recognize that we may be at a higher risk of contracting COVID-19 as a result of participating in the activities, events and opportunities offered by Ironbound Boys and Girls Club and the Programs, and hereby assume the risk that I or my son/daughter/ward may contract COVID-19. The player, my son/daughter/ward, has received a physical examination from a physician and has been found physically capable of participating in the Programs. I have provided written notice, which was submitted in conjunction with this Release and attached hereto, setting forth any specific issue, condition, or ailment, in addition to what is specified in the NJ Youth Soccer Medical Release Form, that my child/ward has or that may impact my child's/ward's participation in the Programs. I give my consent to have an athletic trainer and/or doctor of medicine or dentistry provide my child/ward with medical assistance and/or treatment during his/her participation in the Programs. I understand that I, my heirs, executors, and administrators, will be responsible financially for the reasonable cost of such medical assistance and/or treatment my son/daughter/ward receives during participation in the Programs. By signing below I acknowledge and represent that I have read this Medical Release and Waiver of Liability set forth herein, that I understand it, and that I sign it voluntarily as my own free act and deed, including without limitation the Release of Liability and Indemnification requirements contained in this document; that I am sufficiently informed about the risks involved in myself and my son/daughter/ward participating in the events and activities offered by Ironbound Boys and Girls Club and the Programs to decide whether to sign this document; that no oral representations, statements, promises or inducements, apart from the foregoing written agreement, have been made; that I am at least eighteen (18) years of age and fully competent to execute this document; and that I execute this document for full, adequate, and complete consideration, with the intent to be fully bound by the same. I agree that this Waiver of Liability shall be governed by and construed in accordance with the laws of the State of New Jersey, and that if any of the provisions set forth herein are found to be unenforceable, the remainder of this Waiver of Liability shall be enforced as fully as possible and the unenforceable provision(s) shall be reformed or modified to a reasonable extent required to permit enforcement of this Waiver of Liability as a whole.

Session (\$10 discount on 2 nd child)	Choose Session (X)	Amount	Type of Payment	Date of Payment	Check #	Received by
SPRING 2021 ONLY		\$145				

Signature of Parent/Guardian _____ Date _____