## **Lincoln Public School Sports Registration**

## RELEASE OF LIABILITY AND AGREEMENTS

I, the parent/legal guardian of	- N	, do hereby give my permission
(Students Name) for his/her attendance and participation in the Lincoln Public School's Sports Program. I understand that participation in any given sport has the risk of injury, dismemberment, or death. There are no known medical problems for the above named individual that would prevent safe participation.		
<b>MEDICAL CARE AUTHORIZATION</b> : In the event that said minor is injured or becomes ill while participating in athletics, I hereby authorize whatever medical care and services are necessary under the circumstances to correct the injury or treat the illness whenever deemed necessary at any medical center or facility. Every attempt to contact the parent/guardian will be made by the school in the event of injury or illness.		
HOLD AND SAVE HARMLESS AGREEMENT: In consideration of mutual covenants and agreements between the parties hereto, it is agreed as follows: I, the parent/legal guardian of the above named child agree to hold and save harmless the Town of Lincoln and Lincoln Public Schools from and against any and all claims, demands, actions, debts, liabilities, and attorney fees arising from any claims on account of, or in any manner predicated upon, injuries received in any manner caused or contributed to the Sports Programs by the town, or its employees.		
<b>UNIFORM AND EQUIPMENT RETURN</b> : In consideration of the benefits to my child from the Sports Program, I agree to either return the uniform and equipment issued to my child in as good condition as when received, except for normal wear and tear, or I agree to pay Lincoln Public Schools the reasonable cost to repair or replace such items.		
<b>TRANSPORTATION</b> : I hereby authorize my bus transportation services.	/ child to be transported to an	d from games and/or practices by contracted
CELL PHONE: Please provide two cell phon	e contact numbers.	
By signing this permission form, you agree to	the terms and conditions as o	utlined above.
SIGNATURE OF PARENT/GUARDIAN	DATE	_
EMAIL	CELL PHONE	CELL PHONE
Sports Financial Management Form		
For a fee of \$ 175.00, your child will be eligib	le to participate in an intersch	nolastic sport.
Sports fees must be paid <b>prior to "Tryouts"</b> i sports offering.	n a season to declare a studen	at eligible for participation in any after-school
Please make checks or money orders payable the All sports fees will be turned in to Scott Burket		d in the Brooks School gymnasium
Sports Fee refunds will be given to all Student Athletes that are cut from a squad following tryouts.		
Enclosed please find my payment in full	\$	