

**City of Huntsville Parks and Recreation - Optimist Recreation Center
YOUTH FUTSAL REGISTRATION**

NAME: _____ AGE: _____ M _____ F _____

ADDRESS: _____ ZIP: _____ TELEPHONE: _____

E-MAIL ADDRESS: _____

SCHOOL: _____ DATE OF BIRTH _____ / _____ / _____

CONTACT PERSON (IN CASE OF EMERGENCY): _____ TELEPHONE: _____

ARE YOU UNDER A DOCTOR'S CARE OR TAKING MEDICATION? ___ Y ___ N IF YES, PLEASE EXPLAIN

In consideration of you accepting my child's entry, I hereby, for myself, my child, my heirs, executors and administrators, waiver and release any and all rights and claims for damages I or my child may have against the City of Huntsville and its representatives, successors and assigns for any and all injuries suffered by myself or my child at any activity sponsored by the City of Huntsville Parks and Recreation Department.

By signing and dating below I am agreeing to the City of Huntsville's Photo Release Waiver. A copy of the waiver can be obtained at the recreation center's front desk.

Parent/Guardian Signature: _____ Date: _____

RETURN THIS TO: Optimist Recreation Center (256) 427-5775
 703 Oakwood Ave NE brenton.avery@huntsvilleal.gov
 Huntsville, Alabama 35811

(For office use) Received by: _____

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