

# **2009 CHRIST THE KING ATHLETIC PARTICIPATION FORM**

**ONE PLAYER/SPORT PER FORM**

**FORM DUE November 24, 2009**

Player's Name: \_\_\_\_\_ Sport: Volleyball

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade \_\_\_\_\_ School: \_\_\_\_\_

I do hereby give approval for my child to participate in the various athletic activities of the Catholic Youth Organization (CYO) during the current school year and summer. I assume all risks and hazards incidental to my child's participation in any sport or other activity, including transportation to and from the games, practices or any other events. I agree to indemnify and save harmless the CYO, the Archdiocese of Indianapolis, the various parishes in the Archdiocese, the Archbishop and priests of the Archdiocese, volunteer coaches, and any other participating or sponsoring organization and all employees officials, representatives and agents of such organizations or persons from all claims, lawsuits or actions of any kind for any and all casualties, damages or losses incurred by me or resulting to my child by reason of participation in any activity sponsored by the CYO. I further agree that no action will be brought by me on my behalf or on the behalf of my child for any loss or damages sustained by me or my child by reason of participation in any activity sponsored by the CYO.

I also agree to pay a participation fee of **\$60.00** - payable to **Christ the King**. Please return to school office **BY NOVEMBER 24, 2009** to the attention of the Sports Committee. For additional information, call Kathy Hubert at 254-9520.

Parent or Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Parent Email:(Used for notifications) \_\_\_\_\_

Parish Member? (Please Circle)    Yes    No

Ck # \_\_\_\_\_

Amt. \$ \_\_\_\_\_