



Village of Blissfield – Parks and Recreation Department
Fall 2023 Soccer Youth Registration Form

Last Day of Registration is August 10, 2023 by 6:00pm **NO EXCEPTIONS!**

Fees: U4, U6 - \$50; U8, U10, U12, U15 - \$65

Make checks payable to the “Village of Blissfield”
NO REFUNDS WILL BE GIVEN AFTER August 10, 2023

CHILD’S D.O.B:

CHILD’S AGE:

PLEASE PRINT CLEARLY

_____ Male Female
Child’s Name

To accomplish team parity, requests for teams or coaches may or may not be granted

Primary Adult Contact: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Cell Phone: _____ email: _____

I am interested in coaching my child’s team (Children of Head Coaches play for free!) Yes No
(Head Coach shirt size: Small Medium Large)

Coaches are required to have concussion training at least every 3 years. Please ask staff how to obtain this free of charge.

SHIRT SIZE (circle one)

	Youth:	Small	Medium	Large	
Adult:	Small	Medium	Large	X-Large	

Check the division for your child’s age group:

_____ U4 (birth year: 2020-2021)	_____ U10 (birth year: 2014-2015)
_____ U6 (birth year: 2018-2019)	_____ U12 (birth year: 2012-2013)
_____ U8 (birth year: 2016-2017)	_____ U15 (birth year: 2009-2011)

Mail in Registration: Please fill out form completely and return with appropriate fees to:

Blissfield Parks & Recreation Dept.
PO Box 129
130 S. Lane Street
Blissfield, MI 49228

For more information, contact:
Danielle Gross – (517) 759-0587
Blissfield Village Office – (517) 486-4347

****PLEASE COMPLETE THE BACK OF THIS FORM****

WAIVER AND RELEASE OF LIABILITY- READ BEFORE SIGNING

In consideration of being allowed to participate in any way in the Village of Blissfield's sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce risk, the risk of serious injury does exist; and,
2. I accept all responsibility to inform the coach or instructor of any pertinent medical information required as part of this activity.
3. I/My child have received and reviewed the State of Michigan, Department of Health & Human Services as required by State Law.
4. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and
5. I will willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
6. I, for myself, my child, and on behalf of our heirs, assigns, personal representatives and next of kin, hereby release and hold harmless, and agree to defend and indemnify the Village of Blissfield, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event (Releasees), with respect to any and all injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the Releasees, any other entity or individual, or otherwise, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Parent Signature

Printed Name

Date