



INNER CITY YOUTH GOLFERS', INC. REGISTRATION FORM – AGES 7-18  
PLEASE PRINT LEGIBLY – ONE CHILD PER FORM

Child's Name \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address \_\_\_\_\_ City/ State/ Zip \_\_\_\_\_

T Shirt Size (circle one): S M L XL (circle one): Youth or Adult Is the child Right-handed \_\_\_\_\_ Left-handed \_\_\_\_\_

Name of School that child attends: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Does this child participate in other golf programs? (circle one): YES NO If Yes, Name of the program \_\_\_\_\_

Parent/Guardian Home Phone Number \_\_\_\_\_ Cell Phone \_\_\_\_\_

Parent/Guardian Email Address \_\_\_\_\_

**EMERGENCY NOTIFICATION & MEDICAL CARE AUTHORIZATION**

Yes \_\_\_\_\_ No \_\_\_\_\_ I Give / Do Not Give permission for my child to be transported to the nearest hospital or medical facility for emergency medical treatment.)

Any Known Allergies (include food and medication): \_\_\_\_\_

Provide medication child is currently taking such as epiPen, inhaler etc.: \_\_\_\_\_

Provide emergency contacts first, last name and telephone number: 1. \_\_\_\_\_

2. \_\_\_\_\_ 3. \_\_\_\_\_

**LIABILITY WAIVER**

The undersigned parent/guardian/custodian hereby waives, relinquishes and releases Inner City Youth Golfers', Inc., its employees, agents, affiliates, associated personnel and sponsors from any and all claims, rights and/or causes of action for personal injury, property damage, wrongful death or inappropriate use of technology arising from their minor child's participation in the Inner City Youth Golfers', Inc. Golf Program/Clinics/Enrichment/Tutoring. This waiver and release is binding upon the parents, guardians, custodians and minor child's heirs, executors, administrators, and assigns. By signing below, the parent/guardian/custodian hereby agrees to save and hold harmless and indemnify each and all parties connected to Inner City Youth Golfers', Inc. as described above, from any liability, cost, claim, and damage whatsoever, which may be imposed on Inner City Youth Golfers', Inc., its employees, agents, affiliates, associated personnel and sponsors for any alleged defects, claims of negligence, mismanagement, lack of control and/or supervision. By signing this document, the undersigned hereby acknowledges that he/she has read the same, that he/she has given up substantial rights, that he/she agrees to be bound by said document, and that he/she has signed the release voluntarily and of his/her own free will. Parents of minors are responsible for setting and conveying the standards that their children should follow when using the Internet.

**PHOTOGRAPHY/VIDEO RELEASE**

I hereby grant Inner City Youth Golfers', Inc. the rights and permission to copyright and/or use and/or publish any photography or video taken of the child on this form. I also understand that this image may be included in part or composite or reproduction thereof in color or black and white for art, advertising, trade, or other similar lawful purposes whatsoever. I hereby waive my right to inspect and/or approve the finished product or the editorial copy that may be used in connection herewith. I hereby release and discharge the above, its successors and all persons acting under its permission or authority or those for whom it is acting from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form that may occur or be produced in the taking of said picture or any processing tending toward completion of the finished picture.

**My signature confirms that I have read and agree to all the above releases.**

Parent/Guardian/Custodian \_\_\_\_\_

Date \_\_\_\_\_

**Return completed forms to: Inner City Youth Golfers', Inc., P.O. Box 10572, Riviera Beach, FL 33404 or scan and email to [icyginc@gmail.com](mailto:icyginc@gmail.com)**