



LTRC – 2016 Ridgely Middle School Soccer Program

Soccer teams are being formed for the following Ridgely Middle School grades, depending upon registration #'s and coaching:

- Girls – 2 teams: 7th and 8th grade
- Boys – 2 teams: 7th and 8th grade

MAIL-IN REGISTRATION ONLY: forms and checks DUE by June 19th, 2016

**BOYS ---- Ali Burke
117 Ardoon Road, Timonium, MD 21093**

**GIRLS ---- Chung Gobell
1017 Adcock Road, Lutherville, MD 21093**

Cost: \$125.00/student

NOTE: Students will not be permitted to try-out if payment & waiver are not received. Please attach a check payable to LTRC to the registration form. This will reserve a tryout spot and will be deposited upon team selection. In the event your child does not make the team, your check will be shredded.

TRY-OUTS

Will be held at the RMS fields or Seminary Park turf field (weather dependent) the 1st/2nd or 3rd week of school from **3:00 p.m. to 4:45 p.m.** The exact dates will be determined over the summer and communicated to registrants via email.

GAMES

All practices and home games will be at Ridgely Middle School and/or Seminary Park. Game start times vary from 3:30 p.m. – 5:00 p.m. All transportation will be provided by parents and each parent is expected to carpool to at least two away games. If you have any questions, please contact:

Boys Coordinator, Ali Burke (410) 591-9071, rmsboysoccer@gmail.com

Girls Coordinator, Chung Gobell (410) 303-3715, cgobell@heathdesigngroup.com

Baltimore County Department of Recreation and Parks

The Baltimore Co. Dept. of Recreation and Parks does not provide background checks on Volunteers. Should you require special accommodations (i.e. sign language interpreter, etc.) please give as much notice as possible by calling the Rec. Office at (410) 887-7684 or the Therapeutic Office at (410) 887-5370 (voice), (410) 887-5319 (TT/Deaf).



DEPARTMENT OF
RECREATION AND PARKS

Lutherville/Timonium Recreation Council Registration Form

This Registration Form shall be completed by the participant or, if the participant is a minor/child, by the legal authorized parent or guardian of such minor/child participant. This information may be shared with volunteers/coaches and staff for the purpose of the administration of the program.

Enrollment Information:

Participant's Name: _____ Date of Birth: ___ / ___ / ___ Male: ___ Female: ___

Street Address: _____ Home Phone: _____

City/State: _____ Zip Code: _____ Parent's E-Mail: _____

Grade (as of Fall 2016) _____ Position: _____

Uniform Shirt Size (circle one) YM, YL, YXL, AS, AM, AL, AXL Uniform Shorts Size (circle one) YM, YL, YXL, AS, AM, AL, AXL

Activity Registering for: **Ridgely Soccer Program**

Emergency/Health Issues: In case of emergency, please notify (if minor/child participant, provide parent's information or Guardian, as appropriate).

Name: _____ Relationship: _____ Home Phone _____ Cell Phone _____

Name: _____ Relationship: _____ Home Phone _____ Cell Phone _____

Physician's Name: _____ Physician's Phone: _____

Name of Medical Provider: _____ Date of last tetanus immunization: _____

Any medical, psychological, or behavioral conditions we should be aware of (bee stings, food allergies, etc.)?

1. Are there any medical or health factors or limitations that might affect participant's performance in the activity?

Yes ___ No ___

2. Is participant taking any medications or have a condition that may affect participant's safety or performance in the activity?

Yes ___ No ___

3. Is participant required any special accommodations (due to disability) to participate in the activity?

Yes ___ No ___

If yes, please explain:

In case of injury or emergency, I for myself and/or participant (if participant is minor/child), and my personal representatives, heirs and assigns, (severally and collectively "I" for this registration form) give permission for an activity representative to call 911 and transport participant to a hospital. I shall inform the Recreation Council, in writing, of any medical or health conditions of participant that occurs or develops and which could affect participant's safety, performance or participation in or throughout the activity.

Signature of participant or, if minor, of parent/guardian: _____ Date _____

ACKNOWLEDGEMENT, WAIVER AND RELEASE OF LIABILITY: I hereby confirm participant is in good health and able to participate in the activity. I acknowledge the activity may involve risk and danger of bodily injury or death. I fully accept and acknowledge the activities may involve risk, and I hereby assume the risk and responsibility for all dangers and risks associated with the participant in the activity. I further understand that concussion information is available at www.cdc.gov/concussion

I acknowledge Baltimore County, Maryland, the recreation council, and their respective employees, directors, officers, volunteers, members and any other participant, entity, party or person involved in any regard with the activity or the activity premises and their respective agents, personal representatives, heirs, employees, contractors, successors and assigns (each on "activity representative" and collectively the "activity representatives"), shall not be responsible or liable in any regard or manner for any and all property damage or bodily injury (including serious physical injury or even death) incurred by participant or any party related thereto as a result of his/her participation in the activity.

I have read, fully understand, and hereby freely sign, approve of, and agree to the terms of this registration form. I hereby unconditionally release, discharge, covenant not to sue, waive my rights and remedies, and agree to hold harmless the activity representatives from any and all claims, costs, demands, losses, damages, or expenses associated with, in whole or in part, participant's involvement with the activity. I certify all answers and information provided on this registration form are to the best of my knowledge true and correct throughout the activity. I shall inform the recreation council in writing if any information provided in this registration form is incorrect or changes through the course of the activity. I understand Baltimore County and/or the recreation council do not perform criminal and/or background checks on activity representatives. I shall present a government-issued photo identification card including, but not limited to, my driver's license, passport, or United States Visa to the activity representative for review, if requested, at the time I submit this registration form to the recreation council.

Signature of Participant (if over 18) OR of parent/guardian (if under 18): _____ Date: _____

Print Name of Signatory: _____ Relationship to Participant: _____