

COBRA Optimist **Volleyball** Family Registration & Release Form

Name _____ Date of Birth _____ Grade _____ School _____

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Emergency Contact _____ **Emergency Phone Number** _____

Parents Name(s): _____

Home: _____ Cell: _____ Cell: _____

Address: _____ City: _____ St: _____ Zip: _____

EmailAddress: _____

Would you be interested in coaching or volunteering in other ways? YES NO

COST OF COBRA VOLLEYBALL:

Annual Family Registration: \$15 per family

Participation in volleyball: \$15 per child (there may be a additional charge for team uniforms)

Notice: This form must be turned in with Payment before you can practice or participate in any Cobra Activity
Each participant may elect to sell additional raffle tickets to offset the cost of volleyball. Each book of raffle tickets contains 15 tickets to be sold at \$1.00 each. You keep the money and turn in the stubs. The raffle ticket drawing is to be held at a time to be determined.

PLEDGE TO PARTICIPATE: As the parent or guardian of a COBRA Optimists child, I volunteer to participate in at least one community service activity with my child, and to support the fundraising activities that COBRA Optimists uses to fund youth sports. I understand that COBRA Optimists is an organization for the betterment of the community, which strives through sports to enrich the lives of all children regardless of financial ability.

AGREEMENT: I hereby certify that the child listed above is in normal health and able to participate in the COBRA Optimists (hereinafter "Sponsor") Youth program. I assume all risk(s) and hazards incidental to the program and for the transportation to and from the program unless otherwise provided for by the specific program. I hereby indemnify and hold "Sponsor" harmless from all claims, damages, liabilities (including attorney's fees and legal expenses), causes of actions, actions, suits and other legal proceedings in any matter relating to or arising out of the child's participation in this program. I hereby authorize "Sponsor" to seek medical aid in the event that parents or guardians cannot be reached in case of emergency. I understand that "Sponsor" is not responsible for my child past program times.

This parental signature releases COBRA, coaches and volunteers involved from claims (present or future) resulting from any injuries which may occur during COBRA activities. This signature gives us permission to seek emergency medical care as deemed necessary

PARENT OR GUARDIAN SIGNATURE: _____ Date: _____

Make checks payable to COBRA

<http://www.cobraoptimist.org>

(PRIVATE DONATIONS WELCOME AND ARE TAX DEDUCTIBLE)

Cobra Optimist is a 501c3 Organization