

# YORKVILLE YOUTH

## ATHLETIC ASSOCIATION

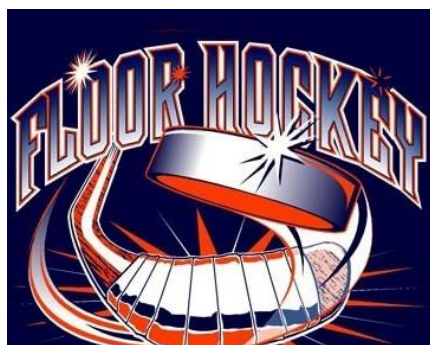
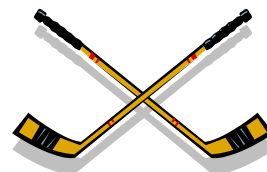
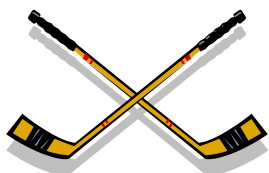
### INDOOR FLOOR HOCKEY PROGRAM

Saturday December 7, 2019 – March 7, 2020

Skipping 12/21, 12/28, 2/15

at

PS 267, 63<sup>rd</sup> Street between 2<sup>nd</sup> & 3<sup>rd</sup> Avenues



**Fee: \$225.00** (sorry, no refunds, credits or transfers at any time)  
For Boys and Girls in grades 2 – 6 (3 PM – 4:30 PM)

**Please include check, application and release.**

Player's Name \_\_\_\_\_ Birth date \_\_\_\_\_ Grade/Sept. 2019 \_\_\_\_\_

School \_\_\_\_\_ Parent's Name \_\_\_\_\_

Parent's Email 1 \_\_\_\_\_ Parent's Email 2 \_\_\_\_\_

Address \_\_\_\_\_ Apt # \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone(#1) \_\_\_\_\_ Telephone(#2) \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Have you played with us before? \_\_\_\_\_ YES \_\_\_\_\_ NO

How did you hear about YYAA? \_\_\_\_\_

Please return this form with a check to Yorkville Youth Athletic Association,  
PO Box 1556, NY, NY 10028

Contact: (212) 360-0022; info@yyaa.org

**Please note: no refunds, transfers or credits at any time.**  
Times/locations subject to change, YYAA cannot be held responsible for such changes.



**2020**

Release Statement:

I, the parent/guardian of \_\_\_\_\_, do hereby give my approval for him/her to participate in any and all activities of the Yorkville Youth Athletic Association and agree to abide by all rules and regulations of the institution. I assume all risks and hazards incidental to such participation in these activities, and I do hereby waive, release, absolve, indemnify, and agree to hold harmless the Yorkville Youth Athletic Association and its staff, the Board of Directors of The Yorkville Youth Athletic Association, officers, directors, organizers, sponsors, supervisors, participants, trainers, independent contractors, agents, representatives, all persons transporting my child/dependent to and from activities, the City of New York, New York City's Department of Parks and Recreation, and their respective officials, from any claims, loss, liability, expense or damage arising out of an injury to my child/dependent, whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident or liability insurance. I understand that this release applies to both future and present injuries, damages or loss and is binding on the Player and the Players heirs, executors and administrators.

I understand that the Player may be photographed and/or videotaped during participation in YYAA and hereby grant YYAA permission to use the Players likeness in photographs and/or video in any and all of its publications and in any and all other media.

I have been made aware that YYAA's concussion awareness policy can be found on their website, [www.yyaa.org](http://www.yyaa.org) in the FAQ section.

I also understand that the Yorkville Youth Athletic Association has a no refund, no transfer, no credit policy for any reason at any time for any program. Times and locations are subject to change.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_