YORKVILLE YOUTH ATHLETIC ASSOCIATION

DODGEBALL –*2019 – 2020*

Where: PS 169 on East 88 Street/Park and Lexington **Approximate Time: 6:30 – 9:30 P.M.**
Fee: $175.00 per team of 7 players, per night. **Please have no more than 7 players per team.**

Friday Nights – Circle the date you wish to participate. One form required for each team & night.

September 27 Grade 4 & 5 Participants

October 4 Grade 6 - 8 Participants
October 11 Grade 2 & 3 Participants
October 18 Grade 4 & 5 Participants
October 25 Grade 6 - 8 Participants

November 1 Grade 2 & 3 Participants
November 8 Grade 4 & 5 Participants
November 15 Grade 6 - 8 Participants
November 22 Grade 2 & 3 Participants

December 6 Grade 4 & 5 Participants
December 13 Grade 6 - 8 Participants

January 10 Grade 2 & 3 Participants
January 17 Grade 4 & 5 Participants
January 24 Grade 6 - 8 Participants
January 31 Grade 2 & 3 Participants

February 7 Grade 4 & 5 Participants
February 28 Grade 2 & 3 Participants

March 6 Grade 6 - 8 Participants
March 13 Grade 4 & 5 Participants
March 20 Grade 2 & 3 Participants
March 27 Grade 6 & 8 Participants

Please check appropriate line: __Grade 2 & 3 __ Grade 4 & 5 __Grade 6, 7, 8 __Adult

Contact Name for Team_____ Contact Phone # for team: _____

Players 1. _____ Parent e-mail _____
2. _____ Parent e-mail _____
3. _____ Parent e-mail _____
4. _____ Parent e-mail _____
5. _____ Parent e-mail _____
6. _____ Parent e-mail _____
7. _____ Parent e-mail _____

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.

Yorkville Youth Athletic Association

Waiver/Release Statement

2019-2020

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 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 _____