



Dodgeball

League

Game Day: Tuesday Nights

Game Times: Ages 6-9 at 5:45 pm
Ages 10-13 at 7:00 pm



Where: Dimmitt Community Center
918 Osceola Rd. Belleair



Cost: \$45 member
\$60 non-member



Season: November 3-December 8
(No games November 24)
4 weeks and 1 playoff week

Please register by Tuesday, October 27th

For info contact Belleair Rec at 518-3728
WWW.TOWNOFBELLEAIR.COM

Belleair Dodgeball League Registration Form

Name of Child: _____ Date of Birth: ___/___/___ Age: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Home/Cell Phone: _____ School: _____

E-mail Address: _____

Mother's Name: _____ Cell Phone: _____

Father's Name: _____ Cell Phone: _____

Emergency Contact: _____ Cell Phone: _____

Doctor: _____ Office Phone: _____

Health Information: _____

Special Comments (Please remember that there is no guarantee that we will be able to resolve every situation):

Shirt Size (circle one): YM YL AS AM AL AXL

Please make checks payable to Belleair Rec. Dept.

(Print Child's Name) _____

I, the parent/legal guardian, of the named child on this form, do hereby assume all risks and hazards incidental to my child's participation in activities, use of equipment and facilities of the Town of Belleair's Recreation Department., and I do hereby agree to waive, release, absolve, defend and hold harmless the Town of Belleair, its employees, officers, agents, volunteers, and elected officials from any and all claims, damages losses or injuries of any kind, resulting from my child's participation in activities, use of equipment and facilities of The Town of Belleair's Recreation Department. This release includes a release for any and all losses or injuries arising out of any act or omission or negligence, either active or passive of the Town of Belleair, its employees, officers, agents, volunteers and elected officials. This is given and signed of my own free act and will.

(Signature of Parent or Legal Guardian) _____ **Date:** _____

OFFICE USE ONLY

League (circle one): Ages 6-9 Ages 10-13

League Fee: \$45 Member -or- \$60 Non-Member

Payment: Cash Amt. _____ Check Amt. _____ # _____

Credit type (circle one): Visa MasterCard Other _____ Amt _____

Date Received: _____ Staff Initials: _____