8312 Forsythia Street
Middelton, WI 53562
608-662-PLAY (7529)
www.kevasports.com

Registration/Waiver

_____ _____
Child's Last Name First Name

_____ _____
Child's Last Name First Name

_____ _____
Child's Last Name First Name

_____ _____
Parent's Last Name First Name

Parent Emergency Phone Number(s):Home_____

Work_____Cell_____

Prefered Hospital:_____

Ins Co./HMO:_____

Emergency Contacts (List contacts in case you are not available):

(1)Name:_____ (2)Name:_____

Phone:_____ Phone:_____

Relation:_____ Relation:_____

Allergies:_____

_____

Special Needs:_____

_____

Additional Adults that have your permission to pick up your child:

_____

PLEASE SIGN and DATE WAIVER

In consideration of being allowed to participate in My First Sports LLC's and Keva Sports Center programs and related events and activities at Keva Sports Center, the undersigned:

1. Agree that prior to participating, they will inspect the facilities and equipment to be used, and if they believe that anything is unsafe, they will immediately advise the supervisor of such condition (s) and refuse to participate.
2. Agree that parent (s) or legal guardian (s) will instruct any minor participant that prior to participating, s/he should inspect the facilities and equipment to be used, and if the advise the supervisor of such conditions and refuse.
3. Acknowledge & fully understand that each participant's own action, inaction, or negligence, but the actions, inactions, or negligence of others, the rules of play or the conditions of the premises or any equipment used. Further, that there may be other risks not known to us, or reasonably foreseeable at this time and assume all of the foregoing risks and accepts personal responsibility for the damages following such injury.
4. Intending to be legally bound, do hereby release, waive, discharge and covenant not to sue My First Sports LLC's or Keva Sports Center, administrators, officers, directors, agents and other employees and volunteers, their participants, owners and lessors of the location used to conduct the activities, all which are hereinafter referred to as "lessees" from any and all liability to each of the undersigned, his or her heirs, personal representatives, guardians, parents or other representatives, from any claims, demands, losses, or damages on account of injury, including death, or damage to property caused or alleged to be caused in whole or in party, by negligence of the release or otherwise in connection with association or participation in and/or arising out to travel to, participation in, and returning from participation in My First Sports LLC's and Keva programs.
5. In event that the undersigned sustains injury or illness while participating in My First Sports LLC's and Keva programs, I hereby authorized any emergancy services, first aid, medication, medical treatment or surgery deemed necessary by licensed medical personnel, or other necessary medical personnel. Also give my permission forms, or other necessary medical documents, and to act on behalf of the undersigned in the undersigned or his/her parent are not immediately available to do so.
6. By providing your name and telephone number, you hereby expressly permit and authorize Keva Sports Center and My First Sports LLC, representatives to contact you via telephone or internet to discuss your interest our programs. We reserve the right to use photos for promotional events and future use. Keva Sports Center does not sell your personal information to other parties.

I have read this release

_____
Parent Signature Date