TOWN OF WHEATFIELD

NIAGARA COUNTY

6812 Nash Road
North Tonawanda, NY 14120-1099
Phone: (716) 731-3942 Fax: (716) 731-3320
www.wheatfield.ny.us

Parks & Recreation Department

Date: _____ Activity: **Co-ed T-Ball (ages 4-5)**

Participant's Name: _____ _____ M ☐ F ☐
First Last

Street Address: _____

City: _____ State: New York Zip Code: _____

Age as of **January 1st, 2018:** _____ Birthdate: _____

Home Phone: _____ Cell Phone: _____

E-Mail Address: _____

Disabilities/Allergies: _____

Emergency Contact: _____ Phone #: _____

Special Requests: _____

Uniforms: Once the order is placed, sizes cannot be changed, exchanged, or reordered. Please make sure you order the correct size. Sample sizes are available at the Recreation Dept.

Please circle one of the following:

Youth shirt size: XS S M L XL

Adult Shirt size: S M L XL

Liability Waiver

Any individual who participates in any sport or program activity of the Town of Wheatfield Recreation Department in the Town of Wheatfield, plays at his/her own risk.

I hereby declare that I am aware of any and all hazards that may result in injury to the individual active participation in any sport of the Wheatfield Recreation Department and assume all responsibility of any injury that may result to him/her. I further state that I completely hold harmless the Town of Wheatfield and the Wheatfield Recreation Department of any responsibility in the event any injury may occur. This also pertains to transportation to and from events via personal vehicle, whether a participant or parent.

In the event the participant is a minor child, up to the age of 18 years of age, the parent(s)/Guardian(s) accepts all responsibility to any injury. **Registration fee is non-refundable.**

Parent's/Guardian's Signature: _____

Residency Statement

I, _____ , hereby state that I do, in fact, live at the above address and am a resident of the Town of Wheatfield. I fully realize that this statement will be relied upon by the Town of Wheatfield and any false statement herein is punishable under section 210.45 of the New York State Penal Law, as a misdemeanor subject to a penalty of one year imprisonment, a $1,000.00 fine, or both. I understand violators will be prosecuted.

_____
Wheatfield Resident's Signature

FOR OFFICE USE ONLY

Amount $ _____ Cash ____ Check # _____ CC _____

Residency & birth cert. ckd. Initials: Receipt#

Rev. 10/24/17