

*Your email program must be open for button to work. If sending from yahoo, g-mail or other internet-based email program, save as a file, send as an attachment to Coach Erwin Jones: bobcatcoach@hotmail.com



PHOENIX BOBCATS REGISTRATION FORM

P.O. Box 26545 - Phoenix, Arizona 85068-6545 ~ 602.392.3599

Please note: Fees must be paid at Registration.

Full Name: _____ DOB: (MM/DD/YYYY) _____ Age: _____ Lives with: Father Mother
Address: _____ City: _____ Zip: _____ Parents Guardian
School: _____ School Track Team? Yes No Select Bobcat Club Year _____
Father: _____ Cell: _____ Home: _____ Email: _____
Mother: _____ Cell: _____ Home: _____ Email: _____
Guardian: _____ Cell: _____ Home: _____ Email: _____
Doctor: _____ Office: _____ Dentist: _____ Office: _____

Uniform Size: Warm-ups (Optional): _____ Running Suit: _____ T-Shirt: _____ Indicate Size: Adult (A) S, M, L, XL, XXL Youth: (Y) S, M, L

I understand that for my athlete to be able to participate with Phoenix Bobcats Track Team I must agree to work at a track meet(s) for two hours. I understand a list of assigned dates and times will be given to me; it will be my responsibility to switch with another team parent if I am unable to work my assigned meet/day.

I understand the Phoenix Bobcats Track Team is organized for the benefit of its members. The Board of Directors are appointed and serve on a volunteer basis. Parent or guardian agrees to hold directors harmless for any legal liability while acting in the capacity as a director or officer for the team.

I understand a listing of names, addresses and telephone numbers will be provided to each team member. This is for the sole purpose of car-pooling and should not be used for any other purpose.

I understand my athlete may be attending meets, both in town and out of town. I will either attend the meets or provide a suitable guardian for my athlete. I understand neither the Coach nor the Board Members are responsible for supervision of my athlete's needs while at these meets (see Parental Consent below).

I understand fees due at time of registration are considered non-refundable; meet fees may vary from meet to meet.

The Phoenix Bobcat Track and Field Club Parental Consent; Medical Authorization and Release Form

The undersigned hereby consent to and authorize minor child named above to participate in all events conducted by the Phoenix Bobcat Track and Field Club ("Phoenix Bobcats"). Undersigned further authorizes minor child to travel with representatives of Phoenix Bobcats in private or other vehicles to any such events so conducted.

If a parent/guardian, family physician or dentist cannot be contacted promptly, and a medical or dental emergency has been determined to exist, the undersigned hereby authorizes any representative of the Phoenix Bobcats for and on the behalf of the undersigned, to consent to any x-ray, anesthetic, medical, surgical or dental diagnosis of treatment and any hospital care deemed applicable and rendered by any licensed physician, surgeon, EMT, nurse or dentist, where in their office or in any licensed hospital or health care facility. This authorization is given in advance of any such required care for purposes of empowering any such representative of the Phoenix Bobcats to give the above described consent for any such medical or as they deem advisable. The undersigned hereby agrees to pay any and all reasonable charges incurred as a result of any such medical or dental treatment and to hold Phoenix Bobcats and its representatives harmless therefrom.

The undersigned hereby releases the Phoenix Bobcats and its authorized representatives of and from any and all liability to the undersigned or minor child arising out of or in connection with activities related to the Phoenix Bobcats or any travel connected therewith. To the extent that any applicable law prevents or prohibits the undersigner's release of the Phoenix Bobcats from any liability of minor child as set forth herein, I/we hereby agree to indemnify and hold harmless the Phoenix Bobcats and its representatives of and from any such liability as may be imposed upon any of them.

Note: This consent form must be signed by both parents unless one parent has legal custody of minor child pursuant of a valid court order. In that event, please add the phrase 'legal custody' beneath your signature. Thank you.

Date: _____ Responsible Party: _____ Cell: _____

Date: _____ Responsible Party: _____ Cell: _____

*To expedite registration please e-mail, then print, sign, mail completed form with PAYMENT to:
Phoenix Bobcats - P.O. Box 26545 - Phoenix, AZ 85068-6545*

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