

CITY OF ANSONIA
FREE CHILDREN'S SUMMER SPORTS PROGRAM
PARENT/GUARDIAN REGISTRATION & EMERGENCY

CONTACT FORM:

PROGRAM LOCATION	Nolan Field, 350 Wakelee Avenue, Ansonia, CT, 06401
PROGRAM DATES (check all that apply)	<input type="checkbox"/> SOFTBALL: Monday, August 10th; Tuesday, August 11th & Wednesday, August 12th <input type="checkbox"/> BASEBALL: Monday, August 17th; Tuesday, August 18th & Wednesday, August 19th
PROGRAM TIME	8:00 AM - 12:00 PM
PARTICIPANT AGE	7-14 years old for Ansonia Residents

STUDENT INFORMATION:

STUDENT NAME	
DOB	
AGE	
ADDRESS	<hr/> <hr/> <hr/>

PARENT/GUARDIAN INFORMATION:

PARENT/GUARDIAN NAME	
RELATIONSHIP TO STUDENT	
PHONE NUMBER	
ALTERNATE PHONE NUMBER	
EMAIL ADDRESS	

EMERGENCY CONTACT:

EMERGENCY CONTACT NAME	
RELATIONSHIP TO STUDENT	
PHONE NUMBER	
EMAIL ADDRESS	

MEDICAL INFORMATION:

Please list any medical conditions, allergies, medications, or special accommodations the program staff should be aware of:

DOES YOUR CHILD HAVE ANY ALLERGIES?

NO

YES (please explain): _____

PERMISSION & RELEASE:

I, the undersigned parent/guardian, give permission for my child named above to participate in the City of Ansonia Free Summer Sports Program at Nolan Field.

I understand that reasonable precautions will be taken to ensure participant safety. In the event of an emergency, I authorize program staff to obtain necessary medical treatment for my child if I cannot be reached immediately.

I agree to release and hold harmless the City of Ansonia, its employees, volunteers, and program instructors from liability for injuries or damages that may occur as a result of participation in this program, except in cases of gross negligence or willful misconduct.

PHOTOGRAPHY RELEASE (OPTIONAL):

YES, I give permission for photographs or video of my child to be used by the City of Ansonia for promotional, educational, or informational purposes.

NO, I do not give permission for photographs or video of my child to be used.

PARENT/GUARDIAN NAME (PRINTED)	
SIGNATURE	
DATE	

REGISTRATION SUBMISSION:

Completed forms may be emailed to: JCOPPOLA@ANSONIACT.ORG