

TOWN OF CORTLANDT GIRLS LACROSSE LEAGUE 2024

Fee (1st & 2nd): \$50 with ID Card
\$55 without ID Card
\$66 nonresident

Late Fee (1st & 2nd): \$55 with ID Card
\$60 without ID Card
\$72 nonresident

Fee (3rd-6th): \$90 with ID Card
\$95 without ID Card
\$114 nonresident

Late Fee(3rd- 6th): \$95 with ID Card
\$100 without ID Card
\$120 nonresident

Parents Meeting

March 9th at Lacrosse All Purpose Field, 9:00 AM

ONLINE REGISTRATION AVAILABLE AT
WWW.TOWNOFCORTLANDT.COM/RECONLINE!

If you would like to register by mail,
please return this form and fee to:

Town of Cortlandt Recreation Department
1 Heady Street
Cortlandt Manor, NY 10567

CHECK DIVISION BELOW

1ST/ 2ND GRADE GIRLS LACROSSE_____

3RD/ 6TH GRADE GIRLS LACROSSE_____

Child's Name _____ Male _____ Female _____ D.O.B._____/_____/_____

School _____ Grade _____

Pertinent medical information (Allergies, medications, etc.) _____

Has your child played lacrosse before? **Yes / No**

Name of Team _____

RPG (Registered Parent/Guardian)_____

Street Address _____

Town _____ Zip _____

Home # _____ Work or Cell # _____

Email _____

Emergency Contact Name _____ Emergency # _____

INJURY RELEASE: I agree, or agree on behalf of my minor child, to assume: (i) all risk of personal injury or loss; (ii) bodily injury; and (iii) damage to, loss of, or destruction of any personal property resulting from or arising out of participation in the designated activity. I also release, waive, indemnify, hold harmless, and discharge the Town of Cortlandt from all claims, damages, and injuries arising out of my or my minor child's activities, including my or my minor child's use of equipment and facilities provided by the Town of Cortlandt.

COVID-19 RELEASE: By granting permission for my minor child to participate in any programs sponsored by the Town of Cortlandt, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that this child may be exposed to or infected by COVID-19 by his or her participation. I agree that if he or she is exposed to or infected by COVID-19 during his or her participation in any programs sponsored by the Town of Cortlandt, then my heirs, successors, assigns, and I have waived any right to maintain a lawsuit against the Town of Cortlandt, volunteer coaches, employees, and hired independent contractors, for exposure to COVID-19, and my heirs, successors, assigns, and I shall hold the Town of Cortlandt harmless with respect to any damages incurred from my child contracting COVID-19. Every participant should bring a mask as players on the sideline will be required to wear masks. I acknowledge that I have read and fully understand the terms and conditions.

PHOTO RELEASE: I grant permission to the Town of Cortlandt, on behalf of its agents or employees, to use photographs taken of me on the date and at the location listed below for use in town publications such as brochures and magazines, and to use the photographs on display boards, and to use such photographs in electronic versions of the same publications or on the Town of Cortlandt web site. I hereby waive any right to inspect or approve the finished photographs or printed or electronic matter that may be used in conjunction with them now or in the future whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from the related to the use of the photograph. I hereby agree to release, defend, and hold harmless the Town of Cortlandt and its agents or employees, including any firm publishing and/or distributing the finished product in whole or in part, whether on paper or via electronic media, from and against any claims, damages or liability arising from or related to the use of the photographs, including but not limited to any misuse, distortion, blurring, alterations, optical illusion or use in composite form, either intentionally or otherwise, that may occur or be produced in taking, processing, reduction or production of the finished product, its publication or distribution. **I Accept** _____

By signing up for a program through Community Pass and the Town of Cortlandt Recreation Department, you will automatically be enrolled to receive future communications from the Town of Cortlandt. You may opt of these future communications by clicking unsubscribe.

I understand that my child agrees to play on any team assigned, obey all rules and to attend practice showing fair play and sportsmanship at all times.

Parent's Signature _____ Date _____

THE TOWN OF CORTLANDT DOES NOT PROVIDE ACCIDENT INSURANCE.

COACHES AND SPONSORS NEEDED

If you are interested in coaching, please go to www.townofcortlandt.com/reconline to register or call 914-734-1056 for more information. If you are interested in sponsoring a team, please call 914-734-1056. PLEASE NOTE, registering to be a coach through Community Pass does not guarantee you a coaching position. You will be contacted by the Recreation Supervisor with more information if you are selected.

FOR OFFICE USE ONLY:

TR Receipt # _____ CC Receipt # _____ Amount Paid \$ _____ Date Deposited _____

LACROSSE REGISTRATION DEADLINE: MARCH 9, 2024