



Catholic Youth Organization Track Registration Form

Name of Child _____

Address _____

City _____ State _____ Zip _____

Home Phone: _____ Cell: _____

Child's Date of Birth (mm\dd\yr) _____ Parent Email: _____

Child's School/Parish: _____

Parent/Guardian Information

Name _____ Relationship _____

Name _____ Relationship _____

Emergency Contact

Name _____ Phone _____

Address _____ Relationship _____

AUTHORIZATION TO PARTICIPATE

I hereby give consent for my child/children to participate in the activities in CYO Track. I understand that there is a risk of injury to my child/children as a participant in CYO Track, and I hereby assume the risk of my child/children's participation in such activities. In consideration of the CYO's acceptance of my child/children in CYO Track, and to the extent permitted by law, I hereby agree to release and hold harmless the Archdiocese of New York, Catholic Charities of the Archdiocese of New York, the Archbishop of the Archdiocese of New York, Catholic Charities Community Services, Catholic Youth Organization, its parents and affiliates, and their respective trustees, directors, officers, employees, servants and volunteers from any and all responsibility, liability, claims, and/or demands arising out of my child/children's participation, specifically including any injury that may occur due to their negligence.

In the event that I cannot be reached in an emergency, I give permission to the physician selected by CYO Track to secure and administer treatment, including hospitalization, for all of the above named persons.

I also understand and agree to abide by any restrictions placed on my or my child/children's participation in CYO Track activities, and that I and/or my child/children will be dismissed from the program if we fail to abide by CYO Track program rules.

PHOTO AUTHORIZATION

I hereby consent to the taking of photographs, movies or videos of my child/children by CYO Track or its designated representatives in connection with any advertising. I also grant the right to edit, use and reuse said products for any and all purposes selected by the CYO Track and release any and all rights, title and interest we may have in such photographs, movies or videotapes, finished pictures, reproductions, copies of negatives of the same in connection with such uses.

PRINT NAME OF APPLICANT OR PARENT/GUARDIAN

Date

SIGNATURE OF APPLICANT OR PARENT/GUARDIAN

Date