



Beautiful People

Adaptive Sports for Children with Disabilities

Fall SOCCER and CHEER Squad please circle one

2018 ATHLETE REGISTRATION FORM Please Print Clearly

Last Name First Name Home Phone or Cell

Address

Parent or Guardian e-mail

M / F Date of Birth _____ Age _____ School _____

Diagnosis/Disability: _____

Seizure Disorder: Yes/No Last Occurrence _____ Visual Impairment? Yes/ No Hearing Impaired? Yes / No

Communication: __ Verbal __ Non Verbal ___ Sign ___ Other needs _____

Physician: _____ Walker _____ Wheelchair _____ Other _____

Shirt Size: Youth: S M L Adult: S M L XL XXL Ball needed? _____ # of yrs soccer experience _____

Buddy needed to assist? Yes/No Buddy preferred? (circle) Adult Teen Parent Sibling (must be age 12 or older)

Does your child have a one-on-one aide at school? Yes/No Will your child have a mentor assist them to play? Yes/No

SATURDAYS beginning Sept 8 Noon to 1 PM thru Oct 27th, arrival at 12:30 first two weeks

Our Host: Middletown High School, 24 Gardner Ave Extension

CHILDREN and YOUNG ADULTS with disabilities AGES 5 and up

INSTRUCTION, FULL UNIFORM, AND SOCCER BALL INCLUDED \$75

\$60 bringing own soccer ball. Cheer Squad newcomers \$25 (Call if financial assistance is needed)

Payable to "Beautiful People" Mail check, or visit www.beautiful-people.us and pay on-line

28 Church Street, 2A, Warwick, NY 10990 or FAX 845-986-3351

Office Use Only App. Date: _____ CK # _____ Sponsored _____ Liability Release: _____

Beautiful People 2018 RELEASE FORM

(Not necessary if release form was completed for baseball or basketball 2018)

Athlete's Name _____ Age _____

In consideration for the You Are Beautiful People, Inc (Beautiful People) providing the opportunity for my child to participate in You Are Beautiful People, Inc sports and events, the undersigned does hereby release and agree to indemnify and hold harmless the You Are Beautiful People, Inc and its officers and directors from any and all claims for personal injury, death, property damage, or any type of claim or damage (including but not limited to attorney's fees or litigation expenses) resulting from my child's activities in connection with participation in You Are Beautiful People, Inc or the participation of any family member or guest of the undersigned.

I assume all risks and hazards incidental to such participation in You Are Beautiful People, Inc. games and activities and consent for my child to receive first-aid and/or emergency care by a qualified Emergency Medical Technician or physician or other person qualified to render medical assistance in the event my child suffers an injury during sanctioned games and activities.

I/We agree to be present at all games and activities so that I/We can manage our child's specific needs. I agree to have any and all medication (prescription and nonprescription) for my child and shall be solely responsible for dispensing any such medication to my child.

Parent/Guardian Signature _____ Date _____

I/We understand that there will be media and promotional coverage of You Are Beautiful People, Inc games and activities and I/We give our consent to publish my/our child's name and picture for such purposes. I hereby grant the You Are Beautiful People, Inc, its affiliates, franchisees, advertising and promotional agencies, and their agents, the irrevocable, unrestricted right to use, publish, display and distribute materials bearing my name, voice, likeness or any other identifiable representation of myself, my family members, including my Beautiful People player/child. These materials may appear in any form, style, color or medium whatsoever (including, without limitation, photographs, videotapes, films, sound recordings, software, drawings, prints, broadcast, internet and electronic media). I agree that all material containing identifiable representation of me (including without limitation, all negatives, plates and masters of any photographs, files, prints or tapes) shall be and remain the sole and exclusive property of the You Are Beautiful People, Inc. I hereby release and forever discharge the You Are Beautiful People, Inc from any and all liability and damages relating to my name, voice, likeness or any identifiable representation of me. I hereby waive any right I may have to inspect or approve the finished materials or any part or element thereof that incorporates my name, voice, likeness or any other identifiable representation of myself, my family, including my Beautiful People player/child. I have agreed to the above in consideration of the opportunity given to me by the You Are Beautiful People, Inc. to appear in these materials.

Parent/Guardian Signature _____ Date _____

