SPRING FIELD HOCKEY CLINIC

REGISTRATION DEADLINE: APRIL 14TH

____ Grades K-4th: 5:00 - 6:00pm

____ Grades 5th-8th: 6:00 - 7:00pm

____ Goalie Clinic for Grades 3rd-8th
Wednesdays, May 3rd - June 7th, 5:00-6:00pm

Mondays, May 1st - 22nd
$45 Per Participant
Talbot County Community Center Fields

Name:_____ **Grade:**_____ **Birth Date:**_____ **Gender: M F**

Parent Names (Please Print): _____

Address:_____ **City:**_____ **State:**_____ **ZIP:**_____

Primary Phone:_____ **Email:**_____

Shirt Size (Please Circle One): YS YM YL AS AM AL AXL

I acknowledge that I have complete understanding of the potential risk associated with this activity, including injury and death, and I voluntarily agree to assume all such risk. I hereby release, discharge, indemnify, and agree to told Talbot County, its officers, agents, and employees, harmless from and against any and all liability, claims actions, suits, damages, losses, or injuries of any kind, nature, or description, including without limitation personal injuries and/or death, medical expenses, and economic damages arising or claimed as a result of any act or omission related to the program (s) offered by the Talbot County Department of Parks and Recreation or any affiliated program.

Signature of Parent/Guardian _____**Date**_____

For Office Use: Total Paid_____ Cash / Check / Charge Date_____ Staff Initials_____

Return Forms to: 10028 Ocean Gateway, Easton, MD 21601 ● Phone-410-770-8050 ● Fax-410-822-7107

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