

Town of Clifton Park

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Clifton Park, New York 12065
(518) 371-6651
Fax: (518) 371-1136

Parks, Recreation &
Community Affairs

(518) 371-6667
Fax: (518) 383-5088



**Acknowledgement of Risk
and
Assumption of Personal Responsibility**

I understand that during my participation in the games organized by the league I may be exposed to risk and/or injury. I understand that I assume that sole responsibility.

I understand and accept the fact that the Town of Clifton Park shall not be held responsible for any injury which may occur during my participation, and I specifically agree to hold the Town of Clifton Park harmless and indemnify the Town of Clifton Park from any and all damages, injuries, and/or harm which I may incur as a result of my participation in the league.

Signature

Date

Printed Name

Date of Birth

Address

Phone Number

City, State Zip

E-Mail Address

**Clifton Park Adult Recreation Soccer League
Fall, 2008 Season Registration**

Season Information

- play will begin on the Monday after Labor Day and cease at the end of October
- play will be on Monday nights
- the fee for the season is \$25 and is non-refundable once the season starts

Registration Instructions

- complete this registration form
- complete the "Acknowledge of Risk" form
- write a check for \$25 made out to **Clifton Park Adult Soccer**
- mail all of the above to: *W. Sofko, 15 Arnold Drive, Clifton Park, NY 12065*

Printed Name

Date of Birth

Address

Phone Number

City, State Zip

E-Mail Address

Preferred Position: Forward Midfielder Defender Goalkeeper
 Please check here if you are willing to play as a goalkeeper.

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I understand and accept the fact that the individuals organizing the league shall not be held responsible for any injury which may occur during my participation, and I specifically agree to hold all said individuals harmless and indemnify them from any and all damages, injuries, and/or harm which I may incur as a result of my participation in the league.

Signature

Date