

Fall 2021

## Field Hockey League

**PROGRAM INFORMATION** 

## Tuesdays

September 14 - Oct. 26

Times: 6:00-7:30pm

Grades: K-8

Cost: \$35/child, \$30/add. child

Add. 55 after deadline on 9/2

Financial aid is available to those who show a demonstrated need. Proof of eligibility is required.

Northern Worcester Athletic Complex 9906 Buckingham Lane, Berlin MD 21811 HOW TO REGISTER

In person, mail or online at www.PlayMarylandsCoast.org All payments must be received prior to participation Make checks payable to: Worcester County



Did you know field hockey is the second largest team sport in the world played in over 100 countires? So grab a friend and come learn the game. All skill levels are welcome!

Mouthguards, shinguards and Field Hockey goggles are required. There is a limited supply of Field Hockey sticks if needed.



For more information contact Kelly Buchanan at (410) 632-2144 x2503 or kbuchanan@marylandscoast.org

## Youth Registration Form

Please use a separate registration form for each participant under 18.

Worcester County Field Hockey League Fall 2021

Name:									Age:	Male or Female
Address:						City:			State:	Zip:
Date of Birth: School Attending:									Grade:	
Circle T-Shirt Size:	YS (6-8)	YM (10-12)	YL (14-16)	AS	AM	AL	AXL	AXXL E-mail:		
Parent/Guardian Name:					Home Phone:			one:	Daytin	ne/Cell:
Emergency Contact:							Phone:			

The undersigned, intending to be legally bound for myself and on behalf of my child, as well as, my heirs, and personal representatives do hereby indemnify, release and discharge the County Commissioners of Worcester County, its representatives, employees, contractors, volunteers, and successors and assigns (herein after called "Indemnities"), from any and all liability for injuries, death or damages and from any and all loss, claim, or injuries to my child or to my property, of any kind, arising in any way out of my child's participation in this program. My child has permission to travel with a coach and/or adult volunteer to away games as part of the Worcester County Recreation & Parks Department's Youth Program. I agree that I will defend, indemnify and hold harmless each and every one of the Indemnities against all claims, demands and causes of action including court costs and attorney's fees directly or indirectly from any action or other proceeding arising in any way from participation by my child is physically able and has sufficient training for participation in this program. I hereby authorize medical treatment, at my expense, for my child in the event of an injury or illness during the program. I acknowledge that the County provides no insurance protecting my child. If pictures are taken during the program, I authorize the use of these photos for publicity purposes. The staff of Worcester County Department of Recreation & Parks is committed to providing reasonable accommodations to all participants. If you have special needs, please notify the Worcester County Department of Recreation & Parks is notified in advance. Worcester County Department of Recreation & Parks reserves the right to cancel a program or division which does not meet certain requirements.

If the staff of the Worcester County Department of Recreation & Parks cancels an entire program, the staff will refund all monies. All refund payments will be paid in the form of a county check issued to the payer. Other cancellations on the part of the participant will be refundable as long as it occurs before the program start date or within 2 weeks after the start of a program for a 12-week programs. Other cancellations on the part of the participant will be refundable as long as it occurs before the program start date or after one program session for a 6-week program or summer camp program. Cancellations made by a participant after the above stated timeline will be non-refundable. If a participant is suspended from a program due to inappropriate behavioral, no refund will be given for that program. If a medical condition arises that prohibits a participant's ability to participate in the program has occurred, a participant will only be refunded half of the registration fee.

## Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only												
Date:	Amount:	Cash, Chk, or CC #	Initials:	Receipt #	CAF							

Coaches Meeting: September 2 at 6:00 p.m. at Northern Worcester Athletic Complex.