

**TOWN OF LYME YOUTH COMMISSION  
REGISTRATION  
WAIVER AND RELEASE FORM**

DATE: \_\_\_\_\_

PLAYERS NAME \_\_\_\_\_ AGE \_\_\_\_\_

ADDRESS \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

**PERMISSION SLIP**

**WAIVER AND RELEASE:** In consideration of the acceptance of this application, we the undersigned for ourselves, our heirs, executors and administrators agree to be legally bound to the terms and conditions hereinafter set forth.

We hereby give our consent and approval to the participation of the applicant in the program conducted by the Town Of Lyme Youth Commission, and certify that he/she is physically fit to take part in all activities.

Further, we do hereby waive, release and forever discharge said organization, its staff, representatives, employees and their successors and assigns from any and all claims for damages occurring during the applicant's participation in the program, whether said accident, injury or loss due to negligence or not.

I, \_\_\_\_\_, give my permission for  
(Parent or Guardian)

\_\_\_\_\_ to participate in the  
(Child's name)

\_\_\_\_\_ Program (baseball, softball, soccer, T-Ball)

sponsored by the Town of Lyme Youth Commission.

**LIST ANY MEDICAL PROBLEMS OR ALLERGIES:**

\_\_\_\_\_

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

I AM WILLING TO COACH LEVEL \_\_\_\_\_

**Coaches:** Please File a copy of these forms with the Town Clerk prior to any sport/activity participation.