



Branchburg Recreation FALL FIELD HOCKEY For Grades 2-8

Fall Field Hockey is a program for students in Grades in 2-4, 5-6, and 7-8 to provide the opportunity and training for youth to learn the game of field hockey through the development of individual skill, fitness, teamwork, and fair play. This is a fall sport and the registration deadline is June 30, 2017.

Grades 2-4: \$60 fee includes a t-shirt, socks, and a team photo.

Grades 5-8: \$60 registration fee includes league and referee fees. There will be an **ADDITIONAL UNIFORM FEE** of approximately \$50-\$60. The uniform will include a shirt, skirt, and 2 pairs of socks. The uniform fee will be paid at a later date.

Equipment: Each player will be responsible for their own stick, shin guards, and a mouth guard. Cleats are recommended, but not required.

The field hockey season will run September through October. Practices will be held on Tuesday and Thursday from 5:30-6:30pm. Games will be held on Sundays at either 1:00pm or 2:00pm.

FEE: \$60 if paid by 6/30/17
\$80 after 6/30/17

CODES: Grades 2-4 Y-FH-2-4
Grades 5-6 Y-FH-5-6
Grades 7-8 Y-FH-7-8

Information can be found on the Branchburg Township website under the Recreation Spring/Summer 2017 Program Brochure. **You are welcome to register online through Community Pass via credit card; <https://register.communitypass.net/Branchburg>.** You can also register by mail:

**Branchburg Recreation Department
1077 US Highway 202 North, Branchburg, NJ 08876
908-526-1300 ext 188**

Branchburg Recreation Department
1077 US Highway 202 North, Branchburg, NJ 08876
908-526-1300 ext 188

FALL FIELD HOCKEY Mail In or In Person Registration Form
Make checks payable to Branchburg Recreation
You are welcome to register online through Community Pass via credit
card; <https://register.communitypass.net/Branchburg>.

FAMILY INFORMATION:

RESPONSIBLE PARENT OR GUARDIAN (RPG):

FULL NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

HOME PHONE: _____ **CELL PHONE:** _____

Birth date: _____ **Gender:** _____

Email address: _____

PARTICIPANT INFORMATION:

FULL NAME: _____

BIRTH DATE: _____ **GENDER:** _____ **GRADE:** _____ **SHIRT SIZE:** _____

RELATION TO RPG ABOVE: _____

EMERGENCY CONTACT NAME: _____

EMERGENCY CONTACT PHONE: _____

EMERGENCY CONTACT RELATIONSHIP: _____

**SPECIAL MEDICAL
CONSIDERATIONS:** _____

By checking this box, I am indicating that my child has individual need due to a disability. I need to be contacted regarding reasonable accommodations as per the ADA for my child and will be notified regarding special considerations for my child. Note: The Branchburg Recreation Department will need this form 3 weeks prior to the deadline date.

Waiver for Participant and /by Parent

In consideration of this application, I hereby for myself, heirs, executors and administrators waive and release any claim I may have against the Township of Branchburg, Branchburg Recreation Department, Branchburg Fraternal Order of Police, Branchburg Municipal Alliance or their representatives, successors or assignees for any and all injuries that may be suffered by me in this event. I certify that I am in good physical condition. I further agree that the above named sponsors are under no obligation to provide a physical examination or other evidence of my fitness to participate in this event, the same being my responsibility. I hereby grant full permission to any and all of the foregoing use of my name & photographs of me and/or my child without obligation or liability to me. Important: Under the age of 18 must have this form signed by a parent or guardian.

Signature (Parent/Guardian)

Date

****Please fill out entire registration form and sign.****