



**REGISTRATION FORM**

**PLEASE PRINT - ONE CHILD PER FORM**

Child's Name \_\_\_\_\_ AGE: \_\_\_\_\_

Address \_\_\_\_\_ Is child right-handed \_\_\_\_ or left-handed? \_\_\_\_

City/State/Zip Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Name of School child attends: \_\_\_\_\_

Does this child participate in other golf programs? Yes\_\_ No \_\_

If Yes, Name of the program \_\_\_\_\_

**EMERGENCY NOTIFICATION & MEDICAL CARE AUTHORIZATION**

Parent/Guardian Name and Phone Number \_\_\_\_\_

Please list two Emergency Contacts and their Phone Numbers:

1. \_\_\_\_\_ 2. \_\_\_\_\_

Yes \_\_\_ No \_\_\_ I Give / Do Not Give permission for my child to be transported to the nearest hospital or medical facility for emergency medical treatment.

\_\_\_\_\_  
Parent/Guardian/Custodian Signature DATE

**LIABILITY WAIVER**

The undersigned parent/guardian/custodian hereby waives, relinquishes and releases Reaching Out for Kids, Inc., it's employees, agents, affiliates, associated personnel and sponsors from any and all claims, rights and/or causes of action for personal injury, property damage, or wrongful death arising from their minor child's participation in the Reaching Out for Kids, Inc. Golf Program/Clinics. This waiver and release is binding upon the parents, guardians, custodians and minor child's heirs, executors, administrators, and assigns. By signing below, the parent/guardian/custodian hereby agrees to save and hold harmless and indemnify each and all parties connected to Reaching Out for Kids, Inc. as described above, from any liability, cost, claim, and damage whatsoever, which may be imposed on Reaching Out for Kids, Inc., it's employees, agents, affiliates, associated personnel and sponsors for any alleged defects, claims of negligence, mismanagement, lack of control and/or supervision. By signing this document, the undersigned hereby acknowledges that he/she has read the same, that he/she has given up substantial rights, that he/she agrees to be bound by said document, and that he/she has signed the release voluntarily and of his/her own free will.

\_\_\_\_\_  
Parent/Guardian/Custodian Date

**PHOTOGRAPHY RELEASE**

I hereby grant Reaching Out For Kids, Inc. the rights and permission to copyright and/or use and/or publish any photography taken of \_\_\_\_\_. I also understand that this image may be included in part or composite or reproduction thereof in color or black and white for art, advertising, trade, or other similar lawful purposes whatsoever. I hereby waive my right to inspect and/or approve the finished product or the editorial copy that may be used in connection herewith. I hereby release and discharge the above, its successors and all persons acting under its permission or authority or those for whom it is acting from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form that may occur or be produced in the taking of said picture or any processing tending toward completion of the finished picture.

\_\_\_\_\_  
Parent/Guardian/Custodian Date

**Return completed forms to: Reaching Out For Kids, 237 Baxter Avenue, Cincinnati, OH 45220**