



# NCRTA Sport Meet

## Kids Team Registration Form

Sport: Cricket / Soccer / .....

**I, the participant's parent, agree that my child will abide by the rules of National Capital Region Tamil Association (NCRTA). Recognizing the possibility of physical injury associated with cricket, I hereby release, discharge and/or otherwise indentify NCRTA and the coaches against any claim as a result of my child's participation in the program.**

#	First Name	Last Name	Date of Birth (dd/mm/yyyy)	Address	Phone	Emergency Contact Name/Phone	Signature
1)			/ /		( ) -		
2)			/ /		( ) -		
3)			/ /		( ) -		
4)			/ /		( ) -		
5)			/ /		( ) -		
6)			/ /		( ) -		
7)			/ /		( ) -		
8)			/ /		( ) -		
9)			/ /		( ) -		
10)			/ /		( ) -		

Manager's name, address, phone number: .....

-----Office Use Only-----

Fee Paid: \$ \_\_\_\_\_ Method of Payment: Cheque Cash Registered by: \_\_\_\_\_