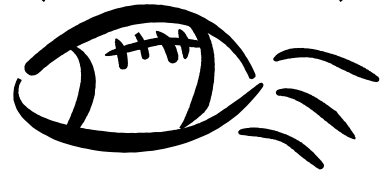


# ***YOUTH FOOTBALL*** (Grades 5k-5)



Hartford Recreation Center . 125 N. Rural St . Hartford, WI 53027 . (262) 670-3730

**DATE:** April 12—May 10 (5 wks)  
**DAY:** Thursdays  
**TIME:** 3:30-4:30 PM (Grades 5k-2)  
4:45-5:45 PM (Grades 3-5)  
**LOCATION:** Woodlawn Park  
**FEE:** \$27 Res./ \$42 Non-Res.  
\$37 Res./ \$52 Non-Res.

This program is lead by Coach Redders & the HUHS football staff!  
Kids will be taught fundamental skills while having fun on the field!  
Learn the basics of the game as well as sharpening skills of passing,  
running, catching, blocking, defense/offense and much more!  
A junior football is included with grades 3rd-5th registration.

## **YOUTH FOOTBALL**

**CHILD'S NAME:** \_\_\_\_\_ **DOB:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **GRADE:** \_\_\_\_\_

**HOME PHONE#:** \_\_\_\_\_ **ALTERNATE PHONE#:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY & ZIP:** \_\_\_\_\_

LIABILITY WAIVER: All participants are required to sign the following release. Parents or guardians must sign for minors. I, the undersigned do hereby agree, or agree for the above named registrant for whom I am the parent or guardian, to participate in the activity indicated am aware of and understand that there may be risks and hazards inherent with participants in this activity. I affirm that I, or the minor registered for this activity, am doing so as a voluntary participant. In consideration of my participation or participation of the minor I do hereby agree to release, waive, absolve, indemnity on behalf of myself or minor, my/his/her/family, my/his/her heirs and my/his/her assigns the City of Hartford, its employees, officers, agents and sponsors from liability for injury, death or loss suffered by me or the minor in any and all present and future claims, liabilities, damages or right of action directly or indirectly resulting out of participation in the activity, using the facilities, or engaging in any activities incidental thereto during the duration of the scheduled program, which result from the ordinary negligence for the City of Hartford, its employees, officers, agents and sponsors. The City of Hartford does not provide accident insurance to participants in recreational activities and I assume full responsibility for any and all injuries or damages which may occur to me while participating. MEDICAL EMERGENCY RELEASE WAIVER FOR MINORS: In the event of a medical emergency, I authorize the Parks & Recreation Department staff to obtain medical treatment for my son/daughter or minor for which I am guardian. PHOTO RELEASE: I agree to allow publication of any photos taken at any program, event, or facility of the City of Hartford Parks & Recreation Department.. MEDICAL INFORMATION: If there are any medical conditions/allergies/disabilities the instructor/program supervisor should be aware of, the participant or parent of the participant should discuss this with the instructor./program supervisor the first time the program meets.

**SIGNATURE** x \_\_\_\_\_ **(Please Make Checks Payable to City Of Hartford)**

The Richfield School District allows approved organization to distribute information for parents and students. The opinions an/or views expressed in this information are not necessarily those of the School District or its personnel.