

Marple Newtown Leisure Services
High School Soccer League
Registration and Insurance Requirement Form

Marple Newtown Leisure Services (610-353-2326) insures all of its activities for **PUBLIC LIABILITY AND PROPERTY DAMAGE ONLY**. Registrants, participants, and general public use is at one's **OWN RISK**.

Marple Newtown Joint Recreation Commission (aka., MN Leisure Services), Marple Township, Newtown Township, Marple Newtown School District, and any of their respective agents **WILL NOT** be responsible for any medical bills received as a result of any participation injury, in any of their programs, activities, or use of properties or facilities. All registrants, or parents of minor children, are **REQUIRED** to complete the following insurance information and certification, before they will be accepted into a program and allowed to participate. **ALL MEDICAL CLAIMS MUST BE SENT TO YOUR PERSONAL HEALTH PLAN PROVIDER**. In addition, I agree that pictures/video taken during programs may be used for future promotional purposes (news releases, web site, etc.).

NAME _____ AGE _____ PHONE# _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

SCHOOL _____ GRADE _____

EMERGENCY CONTACT _____ PHONE# _____

NAME OF INSURANCE PLAN _____

POLICY NO. _____ GROUP NO. _____

NAME & ADDRESS OF FATHER'S EMPLOYER _____

PHONE# _____

NAME & ADDRESS OF MOTHER'S EMPLOYER _____

PHONE# _____

I have read the above requirements and fully understand its content, and hereby certify and agree to hold harmless the parties of the **MARPLE NEWTOWN JOINT RECREATION COMMISSION (aka., MN LEISURE SERVICES)**, for injuries sustained while participating in any of its activities and programs. In the absence of a participant, parent or guardian's signature below, payment of fees and/or participation in the program shall constitute acceptance of the conditions set forth in this release.

Signature of registrant or Signature of parent of a minor