



# Brandon Township Parks & Recreation

## Youth Registration Form

395 Mill Street, P.O. Box 929, Ortonville, MI 48462  
Phone (248)627-4640 www.brandontownship.us  
[Online registration now available!](#)

*For Office Use Only* Updated 11/20/2019

Ck. # \_\_\_\_\_ Amt.\$ \_\_\_\_\_  
Date \_\_\_\_\_ Initials \_\_\_\_\_

**Non-residents add \$10 per program registration. Add \$10 late fee if registering after the deadline.**

Please see flyers for program cost and other information. BGYA recreation scholarships are available for qualified households.

Participant Name \_\_\_\_\_ Date of birth \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Circle Gender: MALE FEMALE Medical Conditions: \_\_\_\_\_

Program(s): \_\_\_\_\_ Request: \_\_\_\_\_

(If applicable) Shirt: YXS YS YM YL YXL AS AM AL AXL Shorts/Pants: YXS YS YM YL YXL AS AM AL AXL

Years of previous experience in sport: \_\_\_\_\_ Primary Position: \_\_\_\_\_

Participant Name \_\_\_\_\_ Date of birth \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Circle Gender: MALE FEMALE Medical Conditions: \_\_\_\_\_

Program(s): \_\_\_\_\_ Request: \_\_\_\_\_

(If applicable) Shirt: YXS YS YM YL YXL AS AM AL AXL Shorts/Pants: YXS YS YM YL YXL AS AM AL AXL

Years of previous experience in sport: \_\_\_\_\_ Primary Position: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell phone: \_\_\_\_\_ Alternate phone: \_\_\_\_\_

Township: BRANDON GROVELAND OTHER E-mail Address \_\_\_\_\_

**Publication Permission:** I grant permission for Brandon Township Parks & Recreation to publish my child's name and/or photo in the local newspaper, cable TV, internet, and any future publications for Brandon Township Parks & Recreation. YES \_\_\_\_\_ NO \_\_\_\_\_

**Waiver:** I agree that neither Brandon Township, Brandon Township Parks & Recreation nor employees/volunteers associated therewith may be held liable for injuries or losses sustained by the participant/participant's family pertaining to involvement with any program for which the participant is registered. My signature waives the right to seek damages for any such injury or loss and indicates agreement with Brandon Township Parks & Recreation's refund policy parameters.

**Refunds:** Registration fees become nonrefundable after the registration deadline. If requested in advance of the program registration deadline, refunds are processed in the amount of the paid registration fee less a \$15 administrative fee. Refunds are NOT issued for absenteeism or for dates cancelled due to weather, field conditions, facility availability, or participant scheduling conflicts. Prorated injury refunds are calculated based upon the date the recreation office receives direct notification of the injury by a parent/legal guardian of the injured minor participant, and are not based upon the injury date. Refund checks are made payable to the signer of the registration form and mailed to the participant address as listed on the registration form. Checks are mailed within two weeks of refund approval. Registration fees for programs cancelled due to low registration numbers are always refunded in full.

Signature (parent/legal guardian) \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_ Relationship \_\_\_\_\_

**Person able to:** Coach Assistant Coach Sponsor Team If coaching, please circle shirt size below

Program(s) \_\_\_\_\_ Shirt Size: AS AM AL AXL AXXL AXXXL

Name(s) \_\_\_\_\_ Request: \_\_\_\_\_

(If different from above) Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_