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**COLUMBUS-LOWNDES RECREATION AUTHORITY**  
**Under-8 Developmental Program**  
**APPLICATION**

**Return this application & \$25.00**

Player Name \_\_\_\_\_

Birth Date \_\_\_\_\_

Player Age \_\_\_\_\_

**Player Gender (mark one)**

Male       Female

**Is this child currently registered for the CLRA Fall Season? (mark one)\***

Yes       No

\*You must be registered as a Rec player in order to register in the developmental program.

Name of CLRA U8 Team my child currently plays on: \_\_\_\_\_

**Parent, are you interested in assisting with this program? (mark one)**

Yes       No

Father's Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
Email Address \_\_\_\_\_

Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
Email Address \_\_\_\_\_

Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

Emergency Contact (other than parent) \_\_\_\_\_

Phone \_\_\_\_\_

**Player's Shirt Size: (mark one)**

Youth X-Small       Youth Small       Youth Medium       Youth Large       Adult Small  
 Adult Medium       Adult Large       Adult X-Large       Adult XX-Large       Adult XXX-Large

**STATEMENT OF UNDERSTANDING**

**The primary goal of the U8 Developmental Program is player development and preparing for the transition into U10 play. This is pursued through enhanced skills training and challenging conditioning. The U8 Developmental Program is not a DII Program. All U8 players registered for CLRA's Recreation Leagues are eligible for the U8 Developmental Program. The U8 Development teams may represent the CLRA in selected tournaments.**

***PARENTS, PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY!!!***

I. I, the parent or guardian of the above named candidate, participant or registrant for a Columbus-Lowndes Recreation Authority team, program, camp or activity hereby give my approval to participate in any and all programs, practices, camps or activities during the season. I assume all risk and hazards incidental to such participation including transportation to and from activities; and I do hereby waive, release, absolve, indemnify and agree to hold harmless the Columbus-Lowndes Recreation Authority, the Board of Directors, the staff and employees directors, organizers, sponsors, supervisors, participants, and persons transporting my child to or from activities, for any claim arising out of an injury to my child. Insurance coverage is the sole responsibility of parents or guardian. The Columbus-Lowndes Recreation Authority does not carry any type of insurance for participants.

II. My child has my permission to receive emergency medical treatment.

III. My child may be photographed during any CLRA activities.

***I have read and understand the above statements I, II & III:***

Parent (Guardian) Signature \_\_\_\_\_

Date \_\_\_\_\_