



KWSC RULES COMPLIANCE - PLAYER

I understand and agree with the goals of the club, and agree to abide by the rules of KWSC and respect all coaches, leaders, referees, players, and spectators involved in the activities of this club.

I HAVE READ, FULLY UNDERSTOOD, AND DO AGREE TO ALL OF THE ABOVE.

_____/_____/_____
(Player's Signature) (Date)

KWSC RULES COMPLIANCE – PARENT OR GUARDIAN

I understand and agree with the goals of the club. I agree to support my child as he/she participates in KWSC. I agree to encourage him/her to abide by the rules of KWSC. I agree to encourage him/her to respect all coaches, leaders, referees, players, and spectators involved in the activities of this club.

I hereby authorize all appointed responsible adult leaders of the King's Warriors to use his/her best judgment, and to take such action to best protect and promote the character and skills of the above named participant during the 2021-2022 season (August 1st, 2021 – July 31st, 2022).

I HAVE READ, FULLY UNDERSTOOD, AND DO AGREE TO ALL OF THE ABOVE.

_____/_____/_____
(Parent/Guardian's Signature) (Date)

<p>1.) Printed Adult's Name _____ Relationship to Participant _____ Adult's Phone Number(_____) _____ - _____</p> <p>2.) If you attend church, what church do you attend? _____ Pastor _____</p> <p>2.) What school does the participant attend? _____</p> <p>3.) Does the participant have current medical insurance? (Circle One): YES NO Insurance Provider: _____ Insurance Policy Number: _____</p> <p>4.) Emergency Contact ("EC") _____ EC's Home or Cell Phone _____ EC's Work Phone _____ Player's Allergies _____ Player's Medicines _____</p>

For all fees and donations please make checks payable to: **The Nehemiah Group, Inc.**