

YOUTH FIELD DAY 2026- PRE REGISTRATION-FORM

Hosted By: Clairton Sportsmen's Club
SATURDAY, JULY 25, 2026

Registration: 7:00 am – 8:30 am
Program: 8:30 am – 4:30 pm

Pre-Registration is required by July 15, 2026 - SPACE IS LIMITED TO 100 PARTICIPANTS

- Parent or guardian **must** accompany participants
- Participants will be placed on one of several squads. If you would like to be paired with another person or group, please indicated on the form and sign up together. If your group or person registers without you, we cannot guarantee you will be on the same team.

PLEASE READ AND PRINT CLEARLY

ALL INFORMATION MUST BE COMPLETED AND SIGNED BY PARENT/GUARDIAN

Participant's Name: _____

Participant's Age: _____ Number of Adults Attending : _____

Parent/Guardian Phone Number: _____

Parent/Guardian Email Address: _____

Name of individual(s) or Group you wish to be paired with (if applicable) _____

No Team Substitutions or Changes will be made after the July 15th Deadline

Please complete both sides of this form and Email to:

lorimsteinert55@gmail.com

All registrations are by email only No registrations will be accepted by phone, text or club drop offs. Please do not drop off at the club

You **WILL** receive a **confirmation** by Email (If you do not receive a confirmation, within 48hrs of registration it is your responsibility to contact us. No exceptions will be made!!)

Have Questions? Please call:
Lori Steinert - 412-913-4387 (if no answer, please leave a message)

RELEASE FROM LIABILITY AGREEMENT

To: Clairton Sportsmen's Club, Inc. (**Activity**)

In consideration of _____ (**Minor**) being permitted to participate in the **Activity** , the undersigned does hereby on behalf of myself, my heirs, executors, administrators and assigns does hereby:

1. State that the undersigned is the parent or guardian of the **Minor** and that the undersigned understands that certain of the events to be conducted during the **Activity** require physical exertion and that the **Minor** is physically fit to participate in such events and give permission to the **Minor** to participate in **Activity** .
2. Assumes all risk of the **Minor** participating in the **Activity**
3. Acknowledges and understands that the **sponsors** nor any other sponsors of the **Activity** carry or maintain health, medical or disability insurance coverage for the **Minor** and that the undersigned assumes all responsibility for maintaining such coverage if same is desired by **Minor** and that the undersigned assumes all responsibility for maintaining such coverage if same is desired by the undersigned for the **minor** .
4. Consents to have any staff, employees, agents or representatives of the **sponsor** or any other sponsor of the **Activity** administer such emergency medical care to the **Minor** as deemed appropriate under the circumstances.
5. Indemnifies and saves harmless the **sponsor**, all other sponsors of the **Activity** , and all member organizations of the sponsor, and their respective members, employees, officers, directors, shareholders, affiliates, agents, representatives, successors and assigns from and against any and all liability incurred by any of them arising as a result of or emanating from the **Minor's** participation in the **Activity** .
6. Release and forever discharge the **Sponsor** , all other sponsors of the **Activity** and all member organization of the **sponsor** , and their respective members, employees, officers, directors, shareholders, affiliates, agents, representatives, successors and assigns of and from all claims, demands, damages, costs, actions and causes of action in respect to death, injury, property or other damages arising or to arise by reason of **Minor's** participation in **Activity**.
7. Agree that in the event that any provision of this Release is held to be invalid by a Court of Competent jurisdiction such invalid provision will not affect the remaining provisions, of this Release, which shall continue to be enforceable.
8. Consent to use of any photographs, motion pictures, digital or other recordings made of the **Minor's** participation in the **Activity** for any legitimate purpose and without further consideration.

This release shall be governed by the laws of the Commonwealth of Pennsylvania.

I ACKNOWLEDGE THAT I HAVE READ, UNDERSTAND AND AGREE WITH THE PROVISIONS SET FORTH ABOVE AND INTENDING TO BE LEGALLY BOUND HEREBY I HAVE SIGNED THIS RELEASE ON THE

_____ DAY OF _____, 2026

Parent or Guardian Name – Print

Signature

Street Address

Phone:

City, State, Zip Code

Email Address (PLEASE PRINT CLEARLY)