



# Registration

Send your completed form with payment to: Empire State Sports Council, 641 Grooms Rd. Suite 190, Clifton Park, NY 12065 or Email to: events@essportscouncil.org.

## REGISTRATION INFORMATION

Male  
 Female

Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Team \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age on Meet \_\_\_\_\_

Address \_\_\_\_\_

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

Phone Number \_\_\_\_/\_\_\_\_/\_\_\_\_ ES Sports Membership # \_\_\_\_\_

Email Address \_\_\_\_\_

## EMERGENCY CONTACT

Contact's Name \_\_\_\_\_ Contact's Phone Number \_\_\_\_\_

## EVENT SELECTION

- 1 \_\_\_\_\_
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_
- 4 \_\_\_\_\_

### Event Limits

Primary/Sub Bantam/Bantam/Midget - 3 events  
Youth/Juniors/Seniors - 4 events  
Open/Masters - 4 events

## MEET SELECTION (Check One or More Boxes)

- Patriot's Invitational
- Constitution Classic
- President's Open
- Adirondack Championships (6/12/2022)
- Independence Invitational

### FEES

Youth - \$15  
Adult - \$30  
Late fee - \$5  
Day of Meet fee - \$10

### ADIRONDACK CHAMPS FEES:

Youth - \$15/1st 2 events; \$5 per additional event  
Adult - \$30/ 1st 2 events; \$5 per additional event

**TOTAL AMOUNT AUTHORIZED or ENCLOSED \$**

Card Provider (Visa or Master Card)  Exp Date

Credit Card Number  3 Digit CSV Code

**I Accept.**

**By checking this box, I confirm that the Athlete and Parent/Guardian accept all rules and regulations as well as authorize this transaction by Liberty Group. I understand that if the total registration cost I have submitted in the field above labeled "registration amount" is incorrect, I will be billed the proper amount for my registration without further notification. I understand there will be no refunds for my non attending for any reason.**

**WAIVER**

In consideration of your acceptance of my entry, I hereby for myself, my heirs, executors, administrators and assigns, waive all claims to damages which I might have against Empire State Sports Council, their Board of Directors and staff, event officials, volunteers, sponsors and site entities (Rensselaer School District; Watervliet School District; Ballston Spa Central School District) for any and all injuries suffered by me at said events.

Entrant: \_\_\_\_\_ Date: \_\_\_\_\_.

If under 18 years, Parent or Guardian: \_\_\_\_\_.