

PLEASE CLEARLY PRINT CHILD/MINOR'S INFORMATION.

First Name	MI	Last Name	Suffix/Nickname
Social Security Number	Home Phone	Date of Birth	Month – Day – Year
Street	City		State
Zip Code			

PLEASE CLEARLY PRINT PARENT/GUARDIAN'S INFORMATION.

First Name	MI	Last Name	Suffix/Nickname
Social Security Number	Home Phone	Date of Birth	Month – Day – Year
Street	City		State
Zip Code			

Under penalty of perjury, I (the undersigned “parent/guardian”) certify the information above is accurate and true and that I am the legal parent/guardian of the above listed child/minor. To allow the Jacksonville Umpires Association (“JUA”) to accept registration and permit participation in officiating activities by the above named child/minor, I, the parent/guardian of said individual, hereby give my consent and agree to release, indemnify and hold harmless the Jacksonville Umpires Association, its officers and agents, its membership and its business partners from any claim arising out of injury to the above named child/minor.

I, the undersigned parent/guardian, give permission for the above named child/minor to sign an application for JUA membership and to sign all other JUA forms necessary to fully effectuate the above named child/minor’s umpiring membership. I hereby jointly and severally to agree to bind above named/child minor within the context of the JUA membership, JUA forms and all documents signed by above named child/minor for JUA. I further agree to completely assume above named child/minor’s liability while above named child/minor officiates and/or participates in JUA functions.

Signature of Parent/Guardian

Date