

CONSENT AND RELEASE FORM

I, THE UNDERSIGNED PARENT/GUARDIAN,
HEREBY CONSENT TO MY CHILD

_____ PARTICIPATING IN THE
ACTIVITIES OF THE 2023-24 KESWICK
ELEMENTARY SPORT LEAGUES WITHIN WHICH
WE ARE REGISTERING. I CERTIFY THAT MY
CHILD IS ABLE TO PARTICIPATE IN THESE
ACTIVITIES.

I UNDERSTAND AND HEREBY AGREE TO
ASSUME ALL OF THE RISKS WHICH MAY BE
ENCOUNTERED DURING KESWICK
ELEMENTARY SPORTS LEAGUES, INCLUDING
ACTIVITIES PRELIMINARY AND SUBSEQUENT
HERETO. I DO HEREBY AGREE TO HOLD
KESWICK CHRISTIAN SCHOOL, INC. AND ITS
AGENTS, OFFICERS, BOARD AND EMPLOYEES,
HARMLESS FROM ANY AND ALL LIABILITY,
ACTIONS, CAUSES OF ACTIONS, CLAIMS,
EXPENSES, AND DAMAGES ON ACCOUNT OF
INJURY TO MY CHILD OR PROPERTY, EVEN
INJURY RESULTING IN DEATH, WHICH I NOW
HAVE OR WHICH MAY ARISE IN THE FUTURE
IN CONNECTION WITH THE KESWICK
ELEMENTARY SPORT LEAGUES OR
PARTICIPATION IN ANY OTHER ASSOCIATED
ACTIVITIES.

I EXPRESSLY AGREE THAT THIS RELEASE,
WAIVER, AND INDEMNITY AGREEMENT IS
INTENDED TO BE BROAD AND INCLUSIVE AS
PERMITTED BY THE LAW OF THE STATE OF
FLORIDA AND THAT IF ANY PORTION THEREOF
IS HELD INVALID, IT IS AGREED THAT THE
BALANCE SHALL, NOTWITHSTANDING,
CONTINUE IN FULL LEGAL FORCE AND
EFFECT. THIS RELEASE CONTAINS THE
ENTIRE AGREEMENT BETWEEN THE PARTIES
HERETO, AND THE TERMS OF THIS RELEASE
ARE CONTRACTUAL AND NOT A MERE
RECITAL.

I FURTHER STATE THAT I HAVE CAREFULLY
READ THE FOREGOING RELEASE, I KNOW THE
CONTENTS THEREOF AND I SIGN THIS
RELEASE AS MY OWN FREE ACT. THIS IS A
LEGALLY BINDING AGREEMENT, WHICH I HAVE
READ AND UNDERSTAND.

PARENT: _____ DATE: _____

MY CHILD IS COVERED UNDER OUR FAMILY
HEALTH INSURANCE PLAN:

HEALTH INSURANCE _____

POLICY NUMBER _____



KESWICK CHRISTIAN SCHOOL

10101 54TH AVE. N
ST. PETERSBURG, FL 33708

727-393-9100
KKING@KESWICKCHRISTIAN.ORG



KESWICK'S YOUTH LEAGUES OFFER:

*QUALITY INSTRUCTION BY CHRISTIAN COACHES AND KCS ATHLETES.

*OPPORTUNITY TO DEVELOP MENTAL, SOCIAL AND PHYSICAL LIFE SKILLS THROUGH THE ATHLETIC ARENA.

*SATURDAY SESSIONS THAT INCLUDE INSTRUCTION AND GAME COMPETITION EACH WEEK.

*EMPHASIS ON CHARACTER BUILDING AS WELL AS SKILL DEVELOPMENT.

*LEAGUE FORMAT AND FACILITIES MODIFIED FOR AGE/SKILL LEVELS.

*LEAGUE T-SHIRT AND END OF SEASON AWARDS.

*ALL LEAGUES OPEN TO BOTH BOYS AND GIRLS.

*ALL LEAGUES OPEN TO BOTH KESWICK AND NON-KESWICK STUDENTS.

SPORTS OFFERED:



FLAG FOOTBALL

AUG. 12-SEPT. 30
GRADES 2-5: 9:30-11:00



SOCCER

OCT. 7-DEC. 9
GRADES K-1: 9:30-10:30
GRADES 2-5: 9:30-11:00



BASKETBALL

JAN. 6-FEB. 24
GRADES 2-3: 9:00-10:30
GRADES 4-5: 10:40-12:15



VOLLEYBALL

MAR. 2-MAY 4
GRADES 3-5: 9:30-11:00



BASEBALL

MAR. 2-MAY 4
GRADES K-5: 9:00-11:00

REGISTRATION FORM:

ATHLETE'S NAME:

PARENT'S EMAIL:

PARENT'S CELL PHONE:

GRADE & TEACHER (IF KCS STUDENT):

T-SHIRT SIZE: (Youth or Adult Size)

Circle one: YS YM YL YXL AS AM AL AXL

MARK THE SPORTS FOR REGISTRATION:

___ FLAG FOOTBALL
___ SOCCER
___ BASKETBALL
___ BASEBALL
___ VOLLEYBALL

COST: \$75 (SIBLING \$45)
REGISTER FOR ALL 4 SESSIONS FOR \$250

PAY BY CASH, CHECK OR CARD.

REGISTRATION FORMS MAY BE DROPPED OFF AT ANY OFFICE OR MAILED TO THE SCHOOL. PLEASE PUT "ATTN: COACH KING" ON ALL ENVELOPES.

MAKE CHECKS PAYABLE TO KESWICK.