UNIVERSITY OF RHODE ISLAND 401.874.7871 www.uri.edu/recservices/imsports

# INTRAMURAL SPORTS

## 14th Annual NIRSA

## Region 1 Flag Football Officials Workshop

### Hosted by The University of Rhode Island

### Saturday, September 17, 2011

### REGISTRATION FORM

| Institution Name: | | | | | | |
|---|---|---|---|---|---|---|
| Your Name: | | | | | | |
| Email: | | | | | | |
| Phone: | | | | | | |
| Shirt Size (circle one): | S | M | L | XL | XXL | XXXL |
| Track (circle one): | Novice | | | Advanced | | |

***For office use only***

Collected by _____

Date _____

Amount paid $_____

**The University of Rhode Island is proud to host the 14th Annual NIRSA Region 1 Flag Football Officials Workshop. The workshop will be held from 9:00am until approximately 4pm on Saturday, September 17. The registration fee for the workshop is $25 and includes a light breakfast, lunch, a copy of the NIRSA Flag & Touch Football Rules Book & Officials' Manual and a commemorative T-Shirt.**

**The workshop will feature both in-class and on-field instruction and all officials will have a chance to officiate live games. All officials should bring with them a whistle, striped officials shirt, black shorts or pants and appropriate athletic clothing including footwear for officiating.**

**Participants are encouraged to register in advance by Faxing completed registration forms to 401.874.4829, ATTN: Chad. Registration fees can be mailed to Chad Gouin, 3 Keaney Road – Suite 1, Kingston, RI 02881 or can be paid on site the day of the workshop. Cash or checks will be accepted. Checks should be made payable to THE UNIVERSITY OF RHODE ISLAND. Sorry, no credit cards. For more information on the workshop, please contact Chad Gouin at 401.874.7871.**

**PLEASE READ AND SIGN THIS PARTICIPATION WAIVER -** I desire to voluntarily engage in the health and fitness programs at the **University of Rhode Island Mackal-Keaney-Tootell Complex** and understand that participation in athletics and recreation involves the risk of personal discomfort and injury which may include muscle soreness, strains and sprains, as well as cardiovascular problems; potentially even heart attack and permanent disability. I agree that my use of equipment, facilities and premises of the University of Rhode Island while participating in athletic and recreation activities constitutes acceptance of that risk regardless of the nature of the injury. I agree that the University of Rhode Island, Board of Governors for Higher Education, their Agents, Employees and the State of Rhode Island shall not be liable for any injury, loss, or damage suffered or sustained by me while participating in athletic or recreation activities at the University. **I understand that the rules and regulations of the Mackal-Keaney-Tootell Complex are designed for the safety and protection of participants and I hereby agree to abide by these rules and regulations. I also understand that certain activities require a minimum level of fitness for safe participation. I consent to participate acknowledging the foregoing risks.**

***I hereby acknowledge that I have read and understand the above stated waiver.***

**SIGNATURE** _____ **DATE** _____