

2016

Jasper Parks and Recreation

Sport Program:	Season/Year

Staff Use Only	
Date Paid:	Receipt #:

Athlete Information

Name: <small>(As listed on Birth Certificate)</small>		Age:	
Address:		Date of Birth:	Grade:
City:	Zip:	Male/Female:	School:
Home Phone:	Cell Phone:	Email:	T-Shirt Size:

Please list any siblings and their age that will be playing this sport during the season for which you are enrolling:

Parental/Guardian/Emergency Information

Contact 1:

Check all that apply

Full Name:	Relationship:	Caregiver	Emergency Contact	Pick-Up
Contact Number:	E-mail Address:			

Contact 2:

Full Name:	Relationship:	Caregiver	Emergency Contact	Pick-Up
Contact Number:	E-mail Address:			

Contact 3:

Full Name:	Relationship:	Caregiver	Emergency Contact	Pick-Up
Contact Number:	E-mail Address:			

Contact 4:

Full Name:	Relationship:	Caregiver	Emergency Contact	Pick-Up
Contact Number:	E-mail Address:			

Participant Waivers

Emergency Clause

In the event I cannot be reached in an emergency, I hereby give my permission to employees/volunteers of the City of Jasper Parks and Recreation to secure proper medical care for my child as deemed necessary. This permission extends from minor first-aid treatment to (under a doctor's orders) hospitalization injections, anesthesia, and other medical procedures deemed necessary.

Signature of Responsible Party

Relationship

Date

Media Clause

I hereby grant permission to record my child's/ward's likeness and/or voice for use by television, films, radio or printed media to further the aims of the City of Jasper Parks and Recreation in related campaigns and magazine articles, booklets, posters and in any other ways they may see fit.

Signature of Responsible Party

Relationship

Date

Staff and Volunteer Alerts

Please list any behavioral problems, diet restrictions, medical conditions, or any other important information for staff/volunteers.

Release of Participation

I assume all risks and hazards involving participants in games, practices, or transportation for this player during the season. I do hereby waive, release and agree to hold harmless the City of Jasper Parks and Recreation department from death, injuries, and/or claims from other participants during the current season.

Signature of Responsible Party

Relationship

Date

*The City of Jasper Parks and Recreation is committed to strengthening our community through:
youth development, healthy activities and community engagement.*