

2017 Fall Athletics Registration Form

Please check activities you are registering for:

***Age Control date is May 31, 2017**

- 5 & 6 FLAG Football \$60
- 7 & 8 Tackle Football \$80
- 9 & 10 Tackle Football \$80
- 11 & 12 Tackle Football \$80
- 5-10 Cheerleading \$70
- 8-17 Cross Country Team \$60

***Age Control date is July 31, 2017**

- 4-5 Coed Soccer \$50
- 6-7 Coed Soccer \$65
- 8-9 Coed Soccer \$65
- 10-11 Coed Soccer \$65
- 12-13 Coed Soccer \$65
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Participants must meet Morgan County residency requirements. A \$25 fee will be added for all Non-Morgan County residents. A \$10 "late" fee will be added for registration after the deadline. \$5 off registration fee if registering two or more children for the SAME sport

Please Print Clearly

Participant's Name _____

Parent E-mail address _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Mother's Name _____ Cell Phone _____

Father's Name _____ Cell Phone _____

Emergency Contact _____ Phone _____

Date of Birth ___/___/___ Age ___ Sex ___ Grade ___ School _____

Medical Conditions/Allergies _____ Current Medications _____

Sibling Name – If in the same league _____

Would a parent like to be a **COACH?** Head Coach Assistant Coach No

If you would like to coach, provide name: _____

Jersey Size – Circle One:

Youth: Small Medium Large **Adult:** Small Medium Large X-Large

Pants Size – Circle One:

Youth: Small Medium Large **Adult:** Small Medium Large X-Large

Parent Information Orientation:

One parent/guardian has completed the required Parent Information Orientation? Yes No

If yes, the Orientation was under the following name (**Print Name**): _____

If no, I understand that I must complete the Parent Information Orientation prior to the season for my child to participate. By signing below, I agree to complete the Parent Information Orientation program and follow the Parents' Code of Ethics.

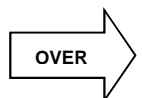
Concussion Policy:

In order to register, parents must initial here _____ to confirm the following:

- ✓ I, the parent/guardian hereby acknowledge receiving concussion information.
- ✓ I accept my responsibility to report my child's symptoms to MCRD staff, coaches, and health care providers.
- ✓ I understand that my child must not have any concussion symptoms before returning to play and must have written permission from a health care provider trained in concussion management before returning to play.

Refund Policy: Full refunds will be given prior to the team programs start (i.e. division of teams, ordering of uniforms, etc.) less a \$5.00 service charge. 50% refunds will be given after the athletic program has started but no games have been played and equipment has been returned. Exceptions: No refund equal to the cost of any special order of sized uniforms (example: Cheer uniform). No refund will be given after a game has been played.

Parent/Guardian Signature _____ Date _____



PARTICIPANT WAIVER & RELEASE OF LIABILITY

MUST BE SIGNED TO PROCESS REGISTRATION

In consideration of the named participant being allowed to participate in any way in the Morgan County Parks and Recreation Department programs, related events and activities, I, the parent/ legal guardian, of the named child, or as an adult participant, hereby acknowledges, appreciates, and agrees to the following:

1. The risk of injury or damages to my child and/or myself from the activities involved in the programs is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. FOR MYSELF, SPOUSE AND CHILD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation; and,
3. I myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives, and next of kin, HEREBY INDEMINIFY AND HOLD HARMLESS the Morgan County Board of Commissioners, and all employees or agents of Morgan County, including all individuals who are affiliated with the programs administered by the Parks and Recreation Department of Morgan County ("Releases"), from any and all liabilities incident to my involvement or participation in these programs or transportation to and from activities, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASES OR OTHERWISE, to the fullest extent permitted by law.
4. I, for myself, my spouse, my child, and on behalf of my/our heirs, assigns, personal representatives, and next of kin, HEREBY RELEASE THE other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event, WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my and/or my child's involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. I hereby grant consent to any and all first aid responders designated by the Morgan County Parks and Recreation Department to provide my child any necessary medical care as a result of any injury/illness. This consent includes First Aid and transportation to/from first aid responders.
6. I further understand that health or accident insurance which would cover my or my child's medical, hospital, or related expenses in the event of injury in this activity is my responsibility. I understand the Parks & Recreation Department of Morgan County strongly recommends that if I do not have sufficient insurance to cover such incidents that I should take the necessary action to obtain it.
7. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my or my child's readiness for participation and/or in the program itself, I will remove myself or my child from the participation and bring such attention of the nearest official immediately; and,
8. I understand that I am bound to abide by the Morgan County Parks & Recreation Department's Code of Conduct. I further understand that these programs are recreational and that if either parent should exhibit continued unsportsmanlike conduct, the child may be removed from the program.
9. I understand that the department may use participant images or videos, and that such may be published in an outlet used to promote or publicize the program or department.
10. In addition, I understand that it is mandatory for a parent of all competitive youth sports participants to complete the Parent Information Orientation training before their child can participate in a youth sports program.

I HAVE READ THIS RELEASE OF LIABILITY, ASSUMPTION OF RISK AGREEMENT AND WAIVER. I FULLY UNDERSTAND ITS TERMS, I UNDERSTAND I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Parent/Guardian Signature _____ **Date** _____