



CSD Parks and Recreation Department

Init.

2014 REGISTRATION & MEDICAL FORM

We can not guarantee special requests for participants to play on a certain team or with certain players.

REGISTRATION INFORMATION

League _____ Division _____ Location _____

Season (*Jr. NBA/She's Got Game ONLY*): ☐ spring ☐ summer ☐ fall

Participant's Name _____ Gender _____

Address _____ City _____ Zip _____

Age _____ Birthdate _____ School _____ Grade _____

Height _____ Weight _____ Phone _____ E-mail _____

T-shirt Size:

Sizes ONLY for: Jr. NBA, She's Got Game, and Flag Football leagues.

☐ youth medium ☐ youth large ☐ adult medium
☐ adult large ☐ adult x-large *Exact uniform size not guaranteed. Available sizes vary per league.*

Experience: ☐ no experience ☐ 1 year experience ☐ 1+ years experience

Hold Harmless Agreement

The participant, or participant's guardian if participant is under 18, shall indemnify, hold harmless and defend the District and its elected officials, employees, agents, volunteers, and any co-sponsor of this activity (collectively, "District"), against all liability (including without limitation court costs and attorneys' fees), claims, losses, demands or actions for injury to or death of any person(s), or damage to property relating to or arising from his or her participation in the activity designated in this notice. The District has no medical insurance for participants, and any injury to, or caused by, the participant will be the participant's sole and exclusive responsibility. The participant, or participant's guardian if actual participant is under 18, acknowledges that the District reserves the right to photograph participant during the activity designated in this notice for future publicity or promotion use only.

The undersigned additionally acknowledges that s/he has read California Civil Code § 1542, which provides:

A GENERAL RELEASE DOES NOT EXTEND TO CLAIMS WHICH THE CREDITOR DOES NOT KNOW OR SUSPECT TO EXIST IN HIS OR HER FAVOR AT THE TIME OF EXECUTING THE RELEASE, WHICH IF KNOWN BY HIM OR HER MUST HAVE MATERIALLY AFFECTED HIS OR HER SETTLEMENT WITH THE DEBTOR.

The undersigned hereby waive all rights and protections otherwise available to them under Civil Code § 1542.

The undersigned, by signing below, acknowledges that s/he has read and understands this notice and, if signing on behalf of a participant under the age of 18, attests that s/he is that participant's legal guardian.

I have read and agree with this release:

Signature of Participant (Parent if under age 18)

Date

EMERGENCY INFORMATION

Parent's Name(s) _____

Phone # Mother (*home*) _____ (*work*) _____ (*cell*) _____ (*pgr*) _____

Phone # Father (*home*) _____ (*work*) _____ (*cell*) _____ (*pgr*) _____

List any allergies, dietary restrictions, medications, etc. (or indicate NONE) _____

Name of Physician _____

Address _____

Phone _____ Insurance Carrier & Number _____

Person to contact in case of emergency other than parents: 1. Name _____ Phone _____
2. Name _____ Phone _____

As the parent/guardian of the above minor child, I hereby authorize the Cosumnes Community Services District as my agent for the purpose of consenting to the examination, administering of anesthetic, medical or surgical diagnosis, treatment and hospital supervision by any physician or surgeon licensed by the State of California pursuant to the provisions of the Medical Practice Act. It is understood this authorization is given in advance of any specified diagnosis, treatment or hospital care being rendered but is given to provide authority and power on the part of said agent to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician or surgeon in the exercise of their best judgement may deem advisable. This authorization is given pursuant to California Family Code Section 6910.

Signature of Participant (Parent if under age 18)

Date

For additional information, call CSD Parks and Recreation at 405-5600 • www.yourcsd.com



Cosumnes CSD Parks and Recreation Department

Parents' Code of Ethics

- I (we) hereby pledge to provide positive support, care, and encouragement for my (our) children participating in youth sports by following the Parents' Code of Ethics.
- I (we) will encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game, practice or other youth sport events.
- I (we) will place the emotional and physical well being of my (our) children ahead of my personal desire to win.
- I (we) will insist that my (our) children play in a safe and healthy environment.
- I (we) will support coaches and officials working with my child, in order to encourage a positive and enjoyable experience for all.
- I (we) will demand a sports environment for my (our) children that is free from drugs, tobacco, and alcohol and refrain from their use at all youth sport events.
- I (we) will remember that the game is for youth – not the adult.
- I (we) will do our best to make youth sports fun for my (our) children.
- I (we) will ask my (our) children to treat other players, coaches, fans, and officials with respect regardless of race, sex, creed, or ability.
- I (we) promise to help my (our) children enjoy the youth sports experience by doing whatever I (we) can, such as being a respectable fan, assisting with coaching, abiding by league rules, or assisting with the league activities.
- I (we) will expect that my (our) children's coach be trained in the responsibilities of being a youth sports coach and that the coach upholds the Coaches' Code of Ethics.

I (we) hereby acknowledge that I (we) have read and understand the above and agree to be held bound by the Parents' Code of Ethics. If I (we) fail to act as described in the Parents' Code of Ethics, I (we) fully understand that my (our) children and I (ourselves) can be asked to leave the Cosumnes CSD Parks and Recreation programs.

Print Parent(s) or Guardian(s) Name(s)

Date

Print Parent(s) or Guardian(s) Name(s)

Date