FULTON – EL CAMINO RECREATION & PARK DISTRICT



2201 Cottage Way Sacramento, Ca. 95825



Registration Form

Child's Name:

Parent's Name (Mother) _					(Father)_				
Phone (H)				_(MW)	(FW)				
				(MCeII)	(FCell)				
E-mail address:									
Address Number & St			root	City		Zip			
					City		<u>Ζί</u> μ		
Date of E	ate of Birth Gender School		School	Child's Shirt Size Youth small, medium, large		Child's Shirt Size Adult small, medium, large			
DIVISION OF PLAY ("X") Placement after draft evaluation by staff									
T-BALL	Min	ors (coacl	n pitch) 6 -	- 9 years	Minors (player pitcl	h) 8 - 11	50/70 10 - 13 years		
Practice day preference (M/W or Tu/Th) (other needs, if necessary)									
	DENT			NTAGTER		/ DI E 4 0 E			
		S CAN NO	OI BE CO	NIACIED	IN AN EMERGENCY	PLEASE	= CALL:		
NAM	E								
PHONE (H)				(W)					
NAM	E			<u> </u>					
PHON	NE (H))		(W)	(C)				

In consideration for being permitted by the Fulton-El Camino Recreation & Park District to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which may have hereafter accrue to me, as a result of participating in said activity. This release is intended to discharge in advance the above district (its officers, employees, & agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, cost, damage, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity.

in said activity.								
PARENTAL CONSENT: (to be co	ompleted and signed by parent/guardian)							
I hereby consent that my son/daughter participate is above activity, and I hereby execute the above Agreement, Waiver, & Releast his/her behalf. I state that said minor is physically able to participate in said activity agree to indemnify and hold the persons and entities mentioned after and harmless from any loss, liability, damage, cost, or expense which may incur as the result of the death or any injury or property damage that minor may sustain while participating in said activity.								
its contents. I am aware that thi	ment, waiver, & release and fully understand is is a release of liability and a contract El Camino Recreation & Park District and I							
SIGNATURE	DATE							
NAME (printed)								
For office use only								
Receipt # Amount	<u>Date</u> <u>Sponsorship</u>							