

CENTER PARKS & RECREATION

SPORTS REGISTRATION please check next to the sport and circle the division

 YOUTH BASEBALL:

Prep(4) T-Ball(5-6) Farm(7-8) Minor(9-10) Major(11-12) Boys(13-14)

 YOUTH SOFTBALL:

6U - 8U - 10U - 12U - 14U

 YOUTH BASKETBALL:

BOYS (5-6) (7-8) (9-10) (11-12) GIRLS (5-6) (7-8) (9-10) (11-12)

 YOUTH FOOTBALL:

FLAG (5) (6-7) TACKLE (8-9) (10-12)

 YOUTH SOCCER:

(5-6) (7-8) (9-10) (11-12)

PLAYER REQUEST if check is made, fill in appropriate information

 PLAY WITH SIBLING(S) list name(s): _____

 PLAY UP TO NEXT AGE DIVISION: _____

 SPECIAL REQUESTS _____

(Please write in specific request, requests are not guaranteed)

 RETURNING PLAYER

PARENT OR GUARDIAN CONTACT INFORMATION

MOTHER Interested in coaching? (yes or no) Head Coach Assistant Coach

Last Name First Name Cell Phone Other Phone

Email: _____

FATHER Interested in coaching? (yes or no) Head Coach Assistant Coach

Last Name First Name Cell Phone Other Phone

Email: _____

Player Information	
Last Name	First Name
Address (No P.O. Box)	City
State	Male/Female Circle One
Zip	Date of Birth
Shirt Size Circle one:	Home & Cell Phone
YS	
YM	
YL	
AS	
AM	
AL	
AXL	
6/8	
10/12	
14/16	
34/36	
38/40	
42/44	
46/48	

CENTER PARKS & RECREATION LIABILITY WAIVER

Player Name/Activity: _____

Minor release:

I hereby acknowledge that I am the parent and/or guardian of the above named minor, and that the said minor has my permission to participate in above named activities and/or programs with the City of Center, Parks & Recreation Department. I understand and agree in giving my permission that the City of Center, its agents and employees, will not be liable or responsible for property damage or personal injuries of any kind or character which may occur during said programs or activities, and I do hereby release and forever discharge the said, City of Center of and from all damages, personal injuries, claims, suits, demands, or causes of action arising out of or in connection with the said activities and/or programs.

I hereby represent and warrant the above is in good health and has no physical condition which represents a risk of participation in any program, sports, and facilities owned or used by the City of Center, Parks & Recreation Department.

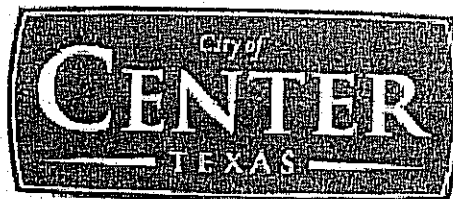
Photo release:

I understand photos and/or video may occasionally be taken of my child while participating in programs. These photos and videos are for department use only and may be used in future brochures, flyers, presentations, advertisements, or the City's website.

THANK YOU FOR SUPPORTING CENTER PARKS & RECREATION

Parent or guardian name: _____
(Please Print)

Signature: _____ Date: _____



For Office Use Only:

Receipt # _____ CA CK CC Amount Paid: _____ Date: _____