



Youth Basketball



Youth T-Ball



Youth Golf

**Child/ Family Information** PLEASE PRINT CLEARLY

REC Member  Yes  No

SHIRT SIZE 2-4 (youth x-small) 6-8 (youth small) 10-12 (youth medium) 14-16 (youth large) AS AM AL AXL AXXL

Child's Name \_\_\_\_\_ Male  Female  School Grade \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Primary Phone \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_

*In case of emergency, which of the parent/ guardians listed should we contact first?*  Mother  Father

Mother/ Guardian Name \_\_\_\_\_ Father/ Guardian Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Cell # \_\_\_\_\_ Home # \_\_\_\_\_ Cell # \_\_\_\_\_ Home # \_\_\_\_\_

Work # \_\_\_\_\_ Work # \_\_\_\_\_

Email \_\_\_\_\_ Email \_\_\_\_\_

**Emergency Information**

**In the case of emergency, and The Rec staff is unable to reach the parent/ guardian listed above, the following third party individual has permission to make decisions regarding the care of my child, including permission to pick up my child from The Rec in the case of an emergency or dismissal from The Rec Center or program sites.**

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_

Primary Phone \_\_\_\_\_ Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Other contact number (s) \_\_\_\_\_

Are there any persons NOT authorized to be around your child due to legal reasons?

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_

**Important Information**

1. Does your child have any special health needs or requests?
2. Due to carpooling or other reasons, do you wish your child to be on a specific person's team? We can make no promises, but can try our best to honor requests. Unfair stacking of teams will not be allowed.
3. Rec Sports programs depend on numerous volunteers. Would you like to volunteer as a Coach, Assistant Coach, Official, Time Keeper, etc.?  Yes  No Coach's Shirt Size: \_\_\_\_\_
4. I certify that my child is of normal health, and capable of participating in the Paris Rec Center Youth Sports programs. I assume all risk and hazards incidental to the conduct of these programs. I hereby authorize the Rec to obtain medical treatment for my child, in the event that I or my child's emergency contact cannot be reached. **INITIAL:** \_\_\_\_\_
5. I support The Rec Center's Youth Sports Philosophy which is based on equal participation, skill development, team work, fair play, physical fitness, good sportsmanship, fun, family involvement and volunteer leadership. **INITIAL:** \_\_\_\_\_
6. I received a Post-Information sheet regarding the Youth Sport I signed up for today. **INITIAL:** \_\_\_\_\_

## Communication

All pertinent information relating to the sport you are currently participating in will be communicated first and foremost online, whether by email or posted on Facebook. If communication cannot be reached to you by these methods, then a text or phone call will be made. It is a MUST that we have current communication information from you. This information will be kept private and will not be utilized by anyone other than the Sports Director and Front Desk, and only in communicating important updates, cancellations, weather related issues or emergencies.

**Please provide your current email:** \_\_\_\_\_

**Please provide your cell phone number if you can receive texts:** \_\_\_\_\_

**If you have Facebook, please put the name you are listed as:** \_\_\_\_\_

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## Photography Release

I hereby irrevocably consent to and authorize the use and reproduction by The Rec Center of Paris or anyone authorized by The Rec Center of any and all photographs and videos which might be or have been taken during the program of my child, for any purpose whatsoever without compensation to me for future promotional purposes.

**Parent/ Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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## Parent Statement of Understanding

I understand The Rec Center Staff and Volunteers are prohibited from babysitting or transporting children in their personal vehicles at any time outside of The Rec programs.

I understand that I am not to leave my child at The Rec Center or program site unless a Rec Center Staff is there to receive and supervise my child.

I understand that The Rec Center and its employees are mandated by state law to report any suspected cases of child abuse or neglect to the appropriate authorities for investigation.

I understand that failure to update personal contact information may result in withdrawal from any program. For safety reasons, it is extremely important to be able to reach the parent/ guardian or emergency contact for a child in our programs.

I understand that should a person arrive to pick up my child who appears to be under the influence of drugs or alcohol, for the child's safety, staff may have no recourse but to contact the police. Please do not put staff in a position where they have to make this judgment call.

**Parent/ Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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## Release from Liability

Recognizing that The Rec Center of Paris will do its best to ensure a safe experience, I understand that accidents may occur from the child's participation in activities. I agree to assume these risks. By signing below, I release The Rec Center, its employees, volunteers, independent contractors, directors and agents from all liability based on any damage, loss or injury whether it is the result of ordinary negligence or otherwise, caused to my child from participation in the program

**Parent/ Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_