

WOODLAND PARK PARKS & RECREATION YOUTH SPORT REGISTRATION



PARENT/GUARDIAN NAME: _____

PARTICIPANT NAME: _____

HAS ANY FAMILY INFORMATION CHANGED? (i.e. Address/Phone/Email/Contacts/etc.) **NO** _____

YES _____

SPORT SIGNING UP FOR: _____

DOES YOUR CHILD PLAY FOR A TRAVELING, COMPETITIVE OR SCHOOL TEAM FOR THE SPORT THEY ARE REGISTERING FOR? YES NO

IF YES, PLEASE EXPLAIN: _____

SHIRT SIZE

(if applicable): YS (sz 6-8) YM (sz 10-12) YL (sz 14-16) ADULT S ADULT M ADULT L ADULT XL

***** THE KIDS NEED YOUR SUPPORT *****

<input type="checkbox"/> Coach (T-shirt Size: _____)	Name: _____
Phone (Best Option): _____	E-mail: _____
Please list any scheduling conflict(s): _____	

***** TEAM SPONSORS *****

<input type="checkbox"/> Team Sponsor (\$100)	____ Paid	Contact Name & Phone: _____
<input type="checkbox"/> Football Sponsor (\$150)		
Business Name (as you would like it printed on the shirts): _____		
Business Mailing Address: _____		

PAYMENT METHOD: CASH CHECK # _____

VISA / MASTERCARD / DISCOVER NUMBER:

_____ EXP. DATE ____/____/____ V CODE _____

TOTAL DUE: _____

I do hereby agree and consent that the Woodland Park Parks and Recreation Department, the Colorado Springs Parks and Recreation Department, the RE-2 School District, Colorado Springs Christian School-WP branch and the volunteer coaches, contracted officials and instructors, and all representatives of the program shall be released and forever acquitted from all or any claim or demand of liability of the damages as a result of any injuries sustained by me or our minor child while enrolled in the program and/or athletic event sponsored by said program. Participants and/or parents must be responsible for their own medical insurance.

Signature: _____ Date: _____