CITY OF ORANGEBURG PARKS & RECREATION DEPARTMENT PROGRAM REGISTRATION & RELEASE FORM LEAGUE:

PARENT'S NAME:ADDRESS:								
TELEPHONE:								
EMERGENCY CONTACT & TELEPHONE:								
NAMES OF PARTICIPANTS	BIRTH DATE	AGE	GENDER M/F	T-SHIRT SIZE	ACTIVITY/ SPORT	FEE	INITIAL - CODE OF ETHICS	
PREVIOUS TEAM(S):			TOTAL FEES:					
STATEMENT OF RELEASE								
With full knowledge of the Recreation Program sponsor undersigned, by this agreement, release the City from a engaged in the above named activities. We do fully releinstructors from all claims arising while in the participat Please note: the City does not accept requests for a par will not provide transportation for regular season or pochild may be used for publicity purposed by the City of a voluntary insurance policy for participants. Parks and registration in a particular age group is insufficient to for	red by the only and all ease the Cition of these rticular coast-season programme Recreation	City of O claims for the activition of the activition of the activition of the activity of the	rangeburg to or any injurie of Parks and I des (including of, etc. for can tion for the and Recreati es the right t	es received was received was received by traveling to reposit or a registrants. On Department of alter the a	while the above nangle partment, employ and from these acounty other reasons. I understand that pent. The City of Orac dvertised age grou	ned applyees, continuities The Cit bhotos/ angebu pings fo	olicants are paches, and s). y of Orangeburg videos of my arg does not offer or leagues if	

Are you interested in sponsoring or coaching a team? Yes ____ No ____ Contact info: __

SIGNATURE OF PARENT/GUARDIAN

YOUTH ATHLETIC PROGRAM FEES

\$25 CITY RESIDENTS
(must provide valid proof that physical home address is within the city limits)
\$50 NON-CITY RESIDENTS
\$10 LATE FEE, IF APPLICABLE

PAYMENT METHODS

Cash, credit cards, checks made payable to the City of Orangeburg

REFUND REQUEST POLICY

Refunds must be requested in writing on our Refund Request Form prior to team placement to be considered.

There is a \$5 per participant administrative fee for all approved refunds. A check will be issued by the Finance Department usually within 2 weeks for cash/money order or 5-6 weeks for checks.

CODE OF ETHICS FOR PARENTS

services, programs, or activities based on race, color, religion, sex, national origin, age, marital status, disability, or any other arbitrary basis.

PRINTED NAME

All parents/guardians must agree to the Code of Ethics for Parents. Please sign your initials by each participant above.

I hereby pledge to provide positive support, care, and encouragement for my child participating in youth sports by following this Code of Ethics for Parents.

- -I will encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game, practice, or other youth sports events.
- -I will place the emotional and physical wellbeing of my child ahead of a personal desire to win.
- -/ will require that my child's coach be trained in the responsibilities of being a youth sports coach and that the coach upholds the Code of Ethics for Coaches.

-I will insist that my child plays in a safe and healthy environment.

DATE

- -I will support coaches and officials working with my child, in order to encourage a positive and enjoyable experience for all.
- -/ will demand a sports environment for my child that is free from drugs, tobacco, and alcohol, and will refrain from their use at all youth sports events.
- -I will remember that the game is for youth not for adults.
- I will do my very best to make youth sports fun for my child.
- -I will help my child enjoy the youth sports experience by doing whatever I can, such as being a respectful fan, assisting with coaching, or providing transportation.
 -I will ask my child to treat the other players, coaches, fans, and officials with respect

regardless of race, sex, creed, or ability.