

**CITY OF ORANGEBURG PARKS & RECREATION DEPARTMENT
PROGRAM REGISTRATION & RELEASE FORM**

LEAGUE: _____

PARENT'S NAME: _____

ADDRESS: _____

TELEPHONE: _____ EMAIL: _____

EMERGENCY CONTACT & TELEPHONE: _____

NAMES OF PARTICIPANTS	BIRTH DATE	GENDER M/F	T-SHIRT SIZE	ACTIVITY/ SPORT	FEE	INITIAL - CODE OF ETHICS

PREVIOUS TEAM(S): _____

TOTAL FEES: _____

Are you interested in sponsoring or coaching a team? Yes ___ No ___ Contact info: _____

STATEMENT OF RELEASE

With full knowledge of the Recreation Program sponsored by the City of Orangeburg through its Parks and Recreation Department, we, the undersigned, by this agreement, release the City from any and all claims for any injuries received while the above named applicants are engaged in the above named activities. We do fully release the City and its Parks and Recreation Department, employees, coaches, and instructors from all claims arising while in the participation of these activities (including traveling to and from these activities).

Please note: the City does not accept requests for a particular coach, team, etc. for carpooling or any other reasons. The City of Orangeburg will not provide transportation for regular season or post-season participation for the registrants. I understand that photos/videos of my child may be used for publicity purposed by the City of Orangeburg Parks and Recreation Department. The City of Orangeburg does not offer a voluntary insurance policy for participants. Parks and Recreation reserves the right to alter the advertised age groupings for leagues if registration in a particular age group is insufficient to form a league. The City of Orangeburg does not discriminate in the provision of services, programs, or activities based on race, color, religion, sex, national origin, age, marital status, disability, or any other arbitrary basis.

YOUTH ATHLETIC PROGRAM FEES
 \$30 CITY RESIDENTS
 (must provide valid proof that physical home address is within the city limits)
 \$55 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

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 well-being of my child ahead of a personal desire to win.
- I 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.
- I will support coaches and officials working with my child, in order to encourage a positive and enjoyable experience for all.
- I 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.

SIGNATURE OF PARENT/GUARDIAN

PRINTED NAME

DATE

PARKS AND RECREATION DEPARTMENT

Recreation Division



WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate on behalf of City of Orangeburg Parks and Recreation Department athletic program and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS (City of Orangeburg Parks and Recreation) their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of participant: _____

Participant signature: _____

Date signed: _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Name of parent/guardian: _____

Parent guardian/signature: _____

Date signed: _____