



FULTON
Parks & Recreation



YOUTH SPORTS REGISTRATION FORM

Last Name: _____ First Name: _____ Sport: _____ Division: _____

Birthdate: _____ Age: (as of Aug. 1) _____ Grade: _____ Gender: Male Female
of this year

Played before? YES or NO Number of Years Played _____ School: _____

SHIRT SIZE: _____ (YS, YM; YL; AS; AM; AL; AXL; AXXL) (Shirts tend to shrink - please order accordingly)

Address: _____

Parent 1 Name: _____

Parent 2 Name: _____

E-Mail: _____

E-Mail: _____

Day Phone: _____

Day Phone: _____

Evening Phone: _____

Evening Phone: _____

PARENTAL RELEASE AND HOLD HARMLESS AGREEMENT

I understand that team members are expected to attend practices, obey team rules of coaches and obey rules of the Parks and Recreation Department. I, as a parent, pledge to demonstrate good sportsmanship and agree to abide by all Parks & Recreation rules and regulations. Those failing to do so will forfeit their uniform, registration fee and position on the team.

I/we the parent(s)/guardian(s) of the above named player understand there are inherent risks involved with sports participation and do hereby give permission for him/her to participate in any and all league activities during the named program. In consideration of the acceptance of the above entry as a member of the program conducted by the Fulton Parks and Recreation Department, I do hereby waive, release and forever discharge any and all rights and claims for damages, which may hereafter accrue to me against the Parks and Recreation Department of the City of Fulton, and their representatives or successors, and/or arising out of travel to and return from said activities conducted through the year.

Signature of parent/guardian

Date: _____

Volunteer Coach/Sponsor Sign Up

I agree to do the following to help with this program:

_____ **COACH (Must complete a coaches application)**

_____ **I am asst. coaching with** _____

_____ **SPONSOR Sponsor Name:** _____

(sponsorship does not guarantee a coaching assignment)

Attention Sponsors: Sponsor name will be placed on the front or on the back of uniforms in single color print only. Logos must be submitted in electronic format.

FORMS SHOULD BE RETURNED TO:

PARKS AND RECREATION DEPT.

808 State Street

FULTON, MO 65251

PHONE: 573-592-3190

FAX: 573-592-3199

**Forms may be placed in the Drop
Box at Legends Rec-Plex.**

The City of Fulton Parks & Rec Dept has a scholarship program available and we encourage people of all income levels to participate in our programs.

The Parks & Recreation Dept. also welcomes people of all abilities to participate in its programs We will make all reasonable efforts to include people of all ability or skill levels.

---- FOR OFFICE USE ONLY ----

Registration Fee Paid: \$ _____

Balance Due: \$ _____

Received By: _____

Method of Payment: _____ Check _____ Cash _____ Debit / Credit _____ Scholarship _____
_____ 3% Credit Fee

Date: _____