



PARTICIPANT REGISTRATION FORM

Check ONE Activity:

Basketball
Boys & Girls 8-18, Adults 19 & up
Season: January-February

Baseball
Boys 5-18 *New age cutoff: Sep 1
Seasons: 9-18 Play Mar-Jun
5-8: Play Apr-Jun

Softball
Girls 5-18 *Age cutoff: Jan 1
Seasons: 9-18 Play Mar-Jun
5-8: Play Apr-Jun

Soccer
Boys & Girls 5-15
*Age before Aug 1
Season: September-November

Football-Flag & Contact
Please Specify (X):
___ Flag 7-8 *Age before
___ Flag 9-10 Aug 1
___ Contact 10-12
Season: September-November

Youth Volleyball
Girls 10-18 *Age before Aug 1
Season: September-November

Summer Slow Pitch Softball
Girls 8-18
Season: July-August

Adult Volleyball
Men & Women 19 & up
Season: September-November

Adult Softball-Spring/Fall
Men & Women 19 & up
Season: March-April/August-October

Other
Includes participants of all other sports and/or activities not listed above

PLEASE SPECIFY OTHER SPORT OR ACTIVITY BELOW

THIS SECTION MUST BE COMPLETED IN FULL

Please check this box, if this is the first time this person is registering and/or participating in a Sulphur Parks & Recreation sports program or other activities conducted at SPAR facilities.

Today's date ____/____/____

First Name: _____ MI: _____ Last Name: _____

Gender (M or F) _____ D.O.B ____/____/____ Age _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: (____) _____ - _____ Alt. Phone #: (____) _____ - _____

NOTES:

**Please indicate on the above line: (Carpool Request, Sibling Options etc.)*

PARENT/GUARDIAN

SPAR **may** use text and email to provide information including, but not limited to, registration, draft dates, tryout dates, and upcoming events.

Parent/Guardian Name: _____

Phone #: (____) _____ - _____ Relationship to Participant _____

Email: _____

Playing Age is determined by the age of the Child on July 31 (except where noted) of the year in which the sport is played. (For **Youth Softball** the cutoff date is **January 1**, and the **Youth Baseball** cutoff is **September 1**, of the year in which the sport is played)

I do hereby certify that all information on this form is correct and that Sulphur Parks and Recreation (SPAR) and its paid and volunteer workers will not be held responsible for any injury to the participant while participating in any of the recreation program and/or activities at any SPAR facilities and/or during transportation to & from said facilities. Participants are responsible for arranging their own transportation to & from all activities and assume all liabilities related to said transportation. I further understand that SPAR does not provide health and liability insurance coverage for accidents or injuries that occur because of participation in or use of SPAR facilities. I fully understand that there are serious risks from participating in recreation and/or other physical activities. All persons participating in SPAR sponsored activities and/or using SPAR properties/facilities agree to conduct themselves according to SPAR standards for behavior and abide by all disciplinary actions imposed by SPAR. This release is valid for all SPAR sponsored programs and activities until revoked in writing.

The registering party verifies that the participant health and fitness is now and at all future time periods will be acceptable to participate in SPAR programs and/or activities. I understand SPAR requests that all participants consult their physician before becoming physically active.

Signature _____ Date _____

Parent/Guardian's signature (if participant under 18 yrs.) or
Participant's signature (if 18 yrs. or older)