

Carmichael

REGISTRATION FORM

Receipt #: _____

Middle School Volleyball 2024

Child's Name	e: A{	ge:	DOB:	
School Attending:		rade:	Shirt Size: YS YM YL YXL S M L XL XXL	
Parent's Name: Email		mail Address:		
Primary Phone: Seconda		econdary Phone:		
Address: City: _		ity:	Zip:	
league. Th	s from Barrett, Will Rogers, and CM nis is a coed league, meaning that t	eams will be cor safe environment	ce to represent their schools in our volleyball nprised of athletes of all genders. The main twhere they can learn the basics of volleyball	
Barrett: Tue	Info esday, 8/20 after school in the gym	rmation Meeti	ngs Wednesday, 8/21 after school in the MP room	
6 th /7 th Grade Teams		Pro	Program Fee	
<u>Practices</u> :	Tuesdays and Thursdays, after school, in your school's gym, starting September 3 rd	Fee	on per participant includes jersey, coaches, referees, and	
Games:	Mondays and Wednesdays, fro 4pm-7pm, at La Sierra Commu Center's Big Gym, starting September 18 th	m nity Re Ref	Refunds Refunds will be granted in accordance with the CRPD Refund Policy. For more information	
8 th Grade 1	 Teams		out our refund policy, please contact our La rra Office at (916) 483-7826 or visit our	
Practices: Mondays and Wednesdays, after		er wel	osite at www.carmichaelpark.com	
Games:	school, in your school's gym, starting September 4 th Tuesdays and Thursdays, from 7pm, at La Sierra Community Center's Big Gym, starting September 19 th	4pm- Par you sch at (holarships tial scholarships are available to help with r program fee. For information about our tolarships, please contact our district office 916) 485-5322 ext. 29 or visit our website at	
_	<u> </u>		w.carmichaelpark.com	
Payment:	Payment Type: Cash Check			
			Cash Amount: Exp. Date:	
	Signatur		CVV:	

Carmichael Recreation & Park District

Middle School Volleyball 2024

AGREEMENT, WAIVER, AND RELEASE

In consideration for being permitted by the District to participate in the above-referenced activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the District (including its officers, employees, volunteers, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of active or passive negligence or carelessness on the part of the persons or entities mentioned above. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs, administrators, executors, and assigns and that I shall indemnify and hold the District (including its officers, employees, volunteers, and agents) free and harmless from any loss, liability, damage, cost, or expense which may arise out of or connected in any way with my participation in said activity. Additionally, I fully understand that my participation in the above-referenced activity exposes me to the risk of personal injury, death, communicable diseases, illnesses, viruses, and/or property damage. I hereby acknowledge that I am voluntarily participating in this activity and agree to assume any such risks.

PHOTO AND LIABILITY RELEASE

Name (Printed)

By signing this agreement, you are agreeing to release photo rights, including waiving any right of compensation, to Carmichael Recreation & Park District (CRPD). CRPD reserves the right to photograph facilities, activities, and program participants for potential future use, which may include sharing the photos with the Carmichael Recreation and Park District Foundation dba Carmichael Parks Foundation to use the photos to inform and promote the CRPD. You further hereby release CPRD and Carmichael Parks Foundation from and against any injury or damage arising out of or related to the aforementioned activities. All photos will remain the property of Carmichael Recreation & Park District.

PARENTAL/GUARDIAN CONSENT: (To be completed and signed by parent/guardian if
Participant is under 18 years of age.)
I hereby consent that my child,, participate in the above-referenced activit and I hereby execute the above Agreement, Waiver, and Release on their behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the District (including its officers, employees, volunteers, and agents) free and harmless from any los liability, damage, cost, or expense which may arise out of or connected in any way with said minor's participation in said activity.
I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AN A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT AND I SIGN IT OF MY FREIWILL.
Signature Date