

# Kirtland AFB Youth Sports Registration

Youth Center Members: **Cost: \$35.00** Nonmembers : **\$50.00**

Date: \_\_\_\_\_ Receipt #: \_\_\_\_\_ Staff Initials: \_\_\_\_\_ Sport \_\_\_\_\_

“THE UNDERSIGNED IN CONSIDERATION OF PERMISSION FOR MY CHILD TO PARTICIPATE IN THE KIRTLAND YOUTH SPORTS PROGRAM, AGREE TO SAVE, HOLD HARMLESS, INDEMNIFY, AND DEFEND THE UNITED STATES AND ITS AGENTS FROM ANY AND ALL LIABILITY AND CLAIMS OF WHATEVER KIND, INCLUDING BUT NOT LIMITED TO PERSONAL INJURY AND PROPERTY DAMAGE OCCURRING IN THE CONNECTION WITH OR RISING OUT OF THE ACTIVITIES OR CONDUCT WITH THE PROGRAM. I ALSO AGREE TO ASSUME REPSONSIBILITY FOR AND INDEMNIFY THE UNITED STATES AND ITS AGENTS FOR ANY AND ALL LOSS AND DAMAGE OF WHATEVER KIND CAUSED TO THE PROPERTY OF THE UNITED STATES IF SUCH LOSS OR DAMAGE IS THE RESULT OF THE NEGLIGENCE OR MISCONDUCT OF MY CHILD AT ANY LOCATION CONNECTED WITH THE PROGRAM.”

**A current physical must be on file prior to playing, please check with front desk staff when paying for registration!!!!**

CHILD'S NAME: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ AGE \_\_\_\_\_ SEX: M \_\_\_\_\_ F \_\_\_\_\_  
(First) ( Last) (Year/Month/Day)

YEARS OF EXPERIENCE IN THIS SPORT: \_\_\_\_\_

NAME OF YOUTH TO BE PLACED ON SAME TEAM (sibling/carpool need): \_\_\_\_\_

SPONSOR'S NAME/RANK: \_\_\_\_\_ DUTY PHONE: \_\_\_\_\_  
(First Last)

SQUADRON / OFFICE SYMBOL: \_\_\_\_\_ EMAILS (Work/Home) \_\_\_\_\_

SPOUSE'S NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CELL PHONE NUMBER: \_\_\_\_\_ HOME/WORK EMAIL: \_\_\_\_\_

**\*\*EMERGENCY CONTACT (IN CASE WE CANNOT NOTIFY THE SPONSOR OR SPOUSE)\*\***

CONTACT NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

**MY CHILD HAS THE FOLLOWING HEALTH CONDITIONS:** \_\_\_\_\_

**MY CHILD TAKES THE FOLLOWING MEDICATIONS:** \_\_\_\_\_

AUTHORIZATION FOR MEDICAL CARE: \_\_\_\_\_ DATE: \_\_\_\_\_

**PARENT/GUARDIAN SIGNATURE**

I HAVE READ AND UNDERSTAND THE PARENTS CODE OF ETHICS. MY CHILD HAS AHAD A PHYSICAL IN THE LAST 12 MONTHS AND IS CLEARED TO PLAY SPORTS.

SIGNATURE OF PARENT/GUARDIAN: \_\_\_\_\_

IF YOU WISH TO BE A COACH, PLEASE FILL OUT A VOLUNTEER FORM.

**AWARDS:** A participation award is given to each player. Name on plate will be participants name, KAFB Youth Sports and the current sport & year.

**Name on award:** \_\_\_\_\_.

SHIRT SIZE:

YOUTH SMALL \_\_\_\_\_  
YOUTH MEDIUM \_\_\_\_\_  
YOUTH LARGE \_\_\_\_\_  
ADULT SMALL \_\_\_\_\_  
ADULT MEDIUM \_\_\_\_\_  
ADULT LARGE \_\_\_\_\_  
ADULT X-LARGE \_\_\_\_\_

WHERE DID YOU FIND OUT ABOUT THIS SPORT? BASE PAPER VIEW WORD OF MOUTH CDC FITNESS CENTERS E-MAIL

PRIVACY ACT STATEMENT: **AUTHORITY: 10 U.S.C. 8013. PURPOSE: To obtain personal information concerning participants in Kirtland AFI Youth programs. ROUTINE USES: For internal use only except as permitted by federal law. DISCLOSURE: Disclosure of the requested information is voluntary. Nondisclosure may prevent you child from participating in Kirtland AFB Youth programs.**

# Image Release Authorization

In consideration of participation in the Kirtland AFB Youth Sports Program, the undersigned agrees that the likeness of their child may be photographed or video taped and that such an image may be published to promote the Kirtland AFB Youth Sports Program.



\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

## PARENT'S CODE OF EHTICS

I hereby pledge to provide positive support, care and encouragement for my child participating in youth sports by following this **PARENT'S CODE OF ETHICS PLEDGES:**

- 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 insist that my child play 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.
- I will demand a sports environment for my child that is free of 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 ask my child to treat other players, coaches, fans, and officials with respect regardless of race, sex, creed or ability.
- I promise to help my child enjoy the youth sport experience by doing whatever I can, such as being a respectful fan, assisting with coaching, or providing transportation.
- 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 **Coach's Code of Ethics**.
- I will read the NYSCA National Standards for Youth Sports and do what I can to help all youth sports organizations implement and enforce them.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

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### Kirtland AFB Youth Programs

#### WAIVER AND RELEASE OF LIABILITY

#### READ BEFORE SIGNING

#### ***In consideration of being allowed to participate in any way in the***

Youth sports, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

- 1) The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury 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. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself form 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** Kirtland AFB Youth Programs, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leasers of premises used to conduct the event ("RELEASES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. 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 IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X: \_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date