**Syracuse Parks and Recreation Participation Waiver**

**School Year 2018-19**

**PLEASE READ AND FILL OUT ALL INFORMATION CAREFULLY**

*This form gives you the opportunity to sign up for all Syracuse Parks and Rec programs throughout the school year. For each child, mark the activity they will be participating in. When that activity comes up, you don’t need to sign them up again. Notices will be posted on the website and e-mailed through the Parks & Rec information updates. All programs are tentative and more may be added.*

**HOME INFORMATION**

Parents/Guardians\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ His Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Her Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Person\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you already receiving Parks and Rec updates to your email?** Yes □ No □

**If you’re not, please provide your e-mail so we can keep you informed.**

E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Reminder-Parks and Rec activity information is not sent home through the school system\*

**CHILD INFORMATION**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_ Male/Female *(circle)* Grade\_\_\_\_\_\_ DOB\_\_\_\_\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_ Male/Female *(circle)* Grade\_\_\_\_\_\_ DOB\_\_\_\_\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_ Male/Female *(circle)* Grade\_\_\_\_\_\_ DOB\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **MARK ACTIVITIES FOR EACH CHILD**  **Put an X for each activity** | **Name of Child** | | **Name of Child** | | **Name of Child** | |
|  | |  | |  | |
| **Girls Volleyball**, 3rd – 6th grade, Sept.–Oct., $15.  T-shirts are also $15 if needed.  \*\*Sign up by August 24th\*\* |  | |  | |  | |
| **Girls & Boys Basketball**, 3rd-6th/JH Nov.-Feb., $35. New players will be required to purchase a pullover tank for $17. **Mark size if needed.**  \*\*Sign up by November 2nd \*\* |  | Tank Top |  | Tank Top |  | Tank Top |
|  |  | |  | |  | |
| **Girls & Boys T-Ball**, 4-6 years old, June, $0  \*\*Sign up by May 10th\*\* |  | |  | |  | |
| **Girls Softball**, April-June, 8 & under is $10, 10 & under and up is $30 + uniform. Please include age group this child will play in (**only play in one group**), Age cutoff date is Jan. 1st – i.e. you cannot turn 11 before Jan. 1 and play 10&U.  \*\*Sign up by March 1st \*\* | |  |  | | --- | --- | | 8&U |  | | 10&U |  | | 12&U |  | | 14&U |  | | 16&U |  | | 18&U |  | | | |  |  | | --- | --- | | 8&U |  | | 10&U |  | | 12&U |  | | 14&U |  | | 16&U |  | | 18&U |  | | | |  |  | | --- | --- | | 8&U |  | | 10&U |  | | 12&U |  | | 14&U |  | | 16&U |  | | 18&U |  | | |

**PARKS & REC IMPORTANT INFORMATION**

Website – www.syracusene.com

E-mail – syracuseparksandrec@windstream.net

Phone – 402-269-2173

Cell- 402-269-0742

**PARENTS/GUARDIANS**- Interested in coaching? Mark the following activity box that you would like to help with.

**Girls Volleyball**—3rd\_\_\_\_\_\_\_ 4th\_\_\_\_\_\_\_ 5th\_\_\_\_\_\_\_\_ 6th\_\_\_\_\_\_\_\_

**Girls Basketball**—3rd\_\_\_\_\_\_\_ 4th\_\_\_\_\_\_\_ 5th\_\_\_\_\_\_\_\_ 6th\_\_\_\_\_\_\_\_

**Boys Basketball**—3rd\_\_\_\_\_\_\_ 4th\_\_\_\_\_\_\_ 5th\_\_\_\_\_\_\_\_ 6th\_\_\_\_\_\_\_\_

**Girls Softball**—8&Under\_\_\_\_\_\_10&Under\_\_\_\_\_\_12&Under\_\_\_\_\_\_14&Under\_\_\_\_\_\_16&Under\_\_\_\_\_\_18&Under\_\_\_\_\_

**Girls T-Ball**\_\_\_\_\_\_

**Boys T-Ball**\_\_\_\_\_\_

**WAIVER AND RELEASE OF ALL CLAIMS** –

*Please read this form carefully and be aware that in participating in any activities you will be waiving and releasing all claims you or your minor child/ward might incur out of participation.*

As a participant or parent/guardian of a participant, I recognize and acknowledge that there are certain risks of physical injury to the activities in which my child/ward will participate, and agree with the full risk of any injuries, including death, damages or losses, for which I or my minor child/ward may sustain as a result of participating in any of the activities connected with or associated with any of these programs.  I agree that I waive and relinquish all claims against the City of Syracuse, the City of Syracuse Municipal Facilities Corporation, and the Syracuse-Dunbar-Avoca Public School District, and their officials, officers, agents, servants, employees, and volunteers I or my minor child/ward may have as a result of participating in these activities.

I fully release and discharge the City of Syracuse, the City of Syracuse Municipal Facilities Corporation, and the Syracuse-Dunbar-Avoca Public School District, and their officials, officers, agents, servants, employees, and volunteers from any and all claims from injuries, including death, damages or losses, for which I or my minor child/ward may have or which may accrue to me or my minor child/ward on account of participation in these activities.  I further agree to indemnify and hold harmless and defend the City of Syracuse, the City of Syracuse Municipal Facilities Corporation, and the Syracuse-Dunbar-Avoca Public School District, and their officials, officers, agents, servants, employees, and volunteers from any and all claims resulting from injuries, including death, damages or losses sustained by me or my minor child/ward and arising out of, connected with, or in any way associated with these activities.  I have read and fully understand the information set forth in this WAIVER AND RELEASE OF ALL CLAIMS.

**Signature of Parent/Guardian** **Date**

(Form must be signed before child can participate in any activity)

PLEASE INCLUDE PAYMENT WITH REGISTRATION FORM

**\*\*Please make checks payable to Syracuse Parks & Rec\*\***

**RETURN THIS FORM TO:**

PO Box F

Syracuse, NE 68446

or drop off at City Hall