

Date:
Amount:
Check # or Cash:
Employee Initials:
Birth Certificate:
Proof of Residency:

TRACK AND FIELD 2019 REGISTRATION FORM

- Please print clearly.

Athlete's Name _____ Birthdate _____

Current Age _____ Age as of 12/31/2019 _____ Male/Female _____

Address _____

City _____ County _____ State _____ Zip _____

Current School Attending _____ Grade _____

List track and field experience _____

List any physical limitations, allergies, etc. _____

Does your child need a modification due to a disability to enjoy this program? _____

Father/Guardian _____ Mother/Guardian _____

Home Phone _____ Home Phone _____

Cell Phone _____ Cell Phone _____

Email Address _____ Email Address _____

Primary Person to contact to disseminate information _____

In case of EMERGENCY, please notify _____ Phone Number _____

Please circle one: I live in the following area:

Fayetteville Unincorporated Fayette County Town of Brooks PTC
Town of Tyrone Woolsey Another County (**Add 50% Surcharge**)

TRACK PARTICIPANTS WILL RECEIVE – SINGLET TOP, SHORTS, T-SHIRT AND HOODED SWEAT SHIRT. PLEASE LIST SIZES NEEDED FOR EACH ITEM. SIZES LISTED SHOULD BE EITHER YOUTH SMALL, YOUTH MEDIUM, YOUTH LARGE, ADULT SMALL, ADULT MEDIUM, ADULT LARGE, ADULT X-LARGE

Hooded Sweat Shirt Size: _____ T-Shirt Size: _____

Singlet Size: _____ Short Size: _____

Would you like to purchase an additional hooded sweat shirt for either the athlete or anyone else for \$20?
Yes _____ No _____ If yes list quantity and sizes: _____

Would you like to purchase an additional t-shirt for either the athlete or anyone else for \$10?
Yes _____ No _____ If yes list quantity and sizes: _____

Deadline for additional hooded sweat shirts and t-shirt is January 25, 2019

SEE REVERSE SIDE

As a parent, would you be willing to be one of the following?

Coach

Asst. Coach

Team Parent

The undersigned participant or guardian acknowledges that participation is voluntary and agrees to waive and release any and all rights and claims for damages against the Fayette County Board of Commissioners and all employees and members of the same, for any claim arising out of any injury or damages to myself/child. By signing this release, I/the guardian consent to such participation and also verifies that adequate medical insurance is in effect during this period. In the event of an emergency and I cannot be reached, I give permission for authorities of the Fayette County Parks and Recreation Department to seek immediate medical attention for myself/my child.

I hereby consent to the use and reproduction of any and all photographs and/or video clips taken of me/my child in any form whatsoever for use in the Fayette County Parks & Recreation newsletter, brochures, flyers, on the County and department web sites, and in any other publications produced for the Fayette County Parks and Recreation Department. Consent is also granted for any use of my name/child's name in any part of those publications listed above. I have read this document and am fully aware of the content and implications, legal and otherwise.

Please print your name clearly

Signature

Date

I understand that non-residents will be allowed to participate in the track and field program but will not be allowed to participate in the G.R.P.A. District or State Track Meets.....

PLEASE INITIAL _____

I understand that Birth Certificates and Proof of Residency are required to be submitted to the Parks and Recreation Department prior to February 16 in order to be eligible for the GRPA District Track Meet.....

PLEASE INITIAL _____

CODE OF CONDUCT

The Fayette County Parks and Recreation Department believe that sportsmanship is a core value and its promotion and practice are essential. Participants, parents, officials, administrators and spectators have a duty to assure that their teams/communities promote the development of good character. This code of conduct applies to all participants involved in athletics and Fayette County Parks and Recreation Department sponsored activities/events.

1. Participants will advocate, model, and promote the development of good character to include trustworthiness, respect, responsibility, teamwork, fairness, caring, and citizenship while promoting emotional, physical, and moral well-being above desires and pressure to win.
2. Participants will respect peers, coaches, officials, opponents, and others associated with the activity/event.
3. Participants will promote fair play and uphold the spirit of the rules in the activity/event.
4. Participants will model appropriate behavior at all times.
5. Participants will engage in a healthy lifestyle.

I have read and understand the requirements of this Code of Conduct and acknowledge that I may be disciplined or removed from a Fayette County Parks and Recreation Department sponsored event/activity and/or facility if I violate any of its provisions.

Signature _____

Date _____

As a parent, would you be willing to be one of the following?

Coach

Asst. Coach

Team Parent

The undersigned participant or guardian acknowledges that participation is voluntary and agrees to waive and release any and all rights and claims for damages against the Fayette County Board of Commissioners and all employees and members of the same, for any claim arising out of any injury or damages to myself/child. By signing this release, I/the guardian consent to such participation and also verifies that adequate medical insurance is in effect during this period. In the event of an emergency and I cannot be reached, I give permission for authorities of the Fayette County Parks and Recreation Department to seek immediate medical attention for myself/my child.

I hereby consent to the use and reproduction of any and all photographs and/or video clips taken of me/my child in any form whatsoever for use in the Fayette County Parks & Recreation newsletter, brochures, flyers, on the County and department web sites, and in any other publications produced for the Fayette County Parks and Recreation Department. Consent is also granted for any use of my name/child's name in any part of those publications listed above. I have read this document and am fully aware of the content and implications, legal and otherwise.

Please print your name clearly

Signature

Date

I understand that non-residents will be allowed to participate in the track and field program but will not be allowed to participate in the G.R.P.A. District or State Track Meets.....

PLEASE INITIAL _____

I understand that Birth Certificates and Proof of Residency are required to be submitted to the Parks and Recreation Department prior to February 16 in order to be eligible for the GRPA District Track Meet.....

PLEASE INITIAL _____

CODE OF CONDUCT

The Fayette County Parks and Recreation Department believe that sportsmanship is a core value and its promotion and practice are essential. Participants, parents, officials, administrators and spectators have a duty to assure that their teams/communities promote the development of good character. This code of conduct applies to all participants involved in athletics and Fayette County Parks and Recreation Department sponsored activities/events.

1. Participants will advocate, model, and promote the development of good character to include trustworthiness, respect, responsibility, teamwork, fairness, caring, and citizenship while promoting emotional, physical, and moral well-being above desires and pressure to win.
2. Participants will respect peers, coaches, officials, opponents, and others associated with the activity/event.
3. Participants will promote fair play and uphold the spirit of the rules in the activity/event.
4. Participants will model appropriate behavior at all times.
5. Participants will engage in a healthy lifestyle.

I have read and understand the requirements of this Code of Conduct and acknowledge that I may be disciplined or removed from a Fayette County Parks and Recreation Department sponsored event/activity and/or facility if I violate any of its provisions.

Signature _____

Date _____