THE CITY OF COLUMBUS
ANDREW J. GINTHER, MAYOR
RECREATION AND PARKS DEPARTMENT

CRPD Youth Sports Basketball Registration

1100 Rhoads Avenue, Columbus, OH 43206. 614-645-3228

Sport/ Activity **DRIVING PARK BASKETBALL**

PARENT INFORMATION

Name: _____ **Sex: Male / Female** **Date of Birth:** _____

Address: _____ **City:** _____ **Zip Code:** _____

(Required) Cell Phone: _____ **Work Phone:** _____

Emergency Contact Name: _____ **Emergency Phone:** _____

(Required) Email: _____

REGISTRANT INFORMATION (3 Children per Form)

Child's Name: _____ **Sex: M / F** **Age:** _____ **Date of Birth:** _____

Address: _____ **Cell Phone:** _____

City: _____ **Zip:** _____ **School:** _____

Grade: _____ **Weight:** _____ **T-Shirt Size: YS YM YL YXL AS AM AL AXL A2XL A3XL**
Pant Size: YS YM YL YXL AS AM AL AXL A2XL A3XL

Parent/Guardian Name(s): _____

Cell Phone: _____ **Work Phone:** _____

Email: _____ **Relationship (ex. Mother):** _____

Emergency Medical Information (ex. Allergies): _____

Medications: _____

Special Considerations (ex. Player/Coach Request): _____

Last Name	First Name, M.I.	D.O.B	Male/F	Pant/Shirt	School
1._____	_____	_____	_____	_____	_____
2._____	_____	_____	_____	_____	_____

PARENT AND GUARDIAN VOLUNTEER OPPORTUNITIES

Please select an area that you are willing to assist. (Check all that apply):

_____ Coach _____ Assistant Coach ____Score keeping _____ Referee/Umpire
_____ Concessions Stand _____ Fund Raising
_____ Team Parent _____ Banquet/ Food Donation ____ Other _____

FEES AND REGISTRATION

LEAGUE DIVISIONS AND FEES **COST 60.00 10U & Older/ COST 35.00 6U & 8U**

__ 6U AGE DIVISION __ 8U AGE DIVISION __ 10U AGE DIVISION __ 12U AGE DIVISION __14U AGE DIVISION __ 18U DIVISION

TRANSPORTATION AND PHOTO CONSENT

I authorize my child(ren) to ride in a Columbus Recreation and Parks vehicle or private bus transportation utilized by the City. In case of an accident, damage to property, injury or death, I will **not** hold the City of Columbus, employees or affiliates responsible. **Initial** _____
I authorize Columbus Recreation and Parks to use my child(ren) photos (Circle) **YES NO**

CODE OF BEHAVIOR

As a parent/player & volunteers, we hereby agree not to use foul, profane, or abusive language while participating or attending any Driving Park games or events. This includes any derogatory remarks made to another player, coach, referee/ umpire, or fan. Parents/guardians/family members are encouraged to attend practices and games. Parents are asked to serve or volunteer to help aid and support activity. Any violation of this code may result in being dismissed from this league **without** any refund. All players are required to keep their uniforms neat and clean. All players must be in complete uniform to play a scheduled game, including hat and team shirt, pants/shorts, cleats, shoes, socks, glove or any uniform of sport indicated. **Initial** _____

LIABILITY RELEASE

I understand that by signing this form, I acknowledge that all sports require physical activity with inherent risks, and that my child's voluntary participation carries the risk of **Concussions,** bodily injury, including death. By signing as parent/ guardian/ caregiver I acknowledge of having read the "Ohio Dept. of Health information sheet found here; www.healthy.Ohio.gov/concussion and understand the risk and my responsibility to report any symptoms to coach and their physician. I have received the handout and/or reviewed the Lindsay's Law (Sudden Cardiac Arrest in Youth Athletes) found here **www.odh.ohio.gov/en/landing/Lindsays-Law.** I certify that my child is physically fit to compete in all sports and related physical activities. By signing, I intend to be legally bound, do hereby, for myself, my heirs, executors, and administrator, waive release and forever discharge any and all rights and claims for damages, known or unknown, which may occur or which may hereafter occur to the athlete in connection with these activities against the City of Columbus, Recreation and Parks Department, Driving Park community center and employees, Driving Park Youth Baseball League, respective Board of Directors, coaches, officers of the City and/or the DPYBL, whether such harm or damage is caused by any act or omission or otherwise, any and all damages for which may be sustained by the athlete.

I HAVE READ THE FOREGOING RELEASE AND THOROUGHLY UNDERSTAND IT:

_____ _____
Parent/Guardian's Signature and Date **Player's Signature and Date (If present)**