

2015

COLUMBUS RECREATION AND PARKS FLAG FOOTBALL REGISTRATION FORM

Recreation Center/Organization: Indian Mound

Please Print. Age Division is determined as of 9/01/15. Members of same family may use one form.

FIRST NAME	LAST NAME	DATE OF BIRTH	M or F Circle	AGE DIVISION CIRCLE ONE
			M or F	9-11 12-14
			M or F	9-11 12-14
			M or F	9-11 12-14
			M or F	9-11 12-14

****Birth Certificate or CareSource Card is required to participate. Copy of Birth Certificate or CareSource card must accompany form.***

Parent/Guardian Name _____

Address _____ City _____ Zip _____

Phone: Home _____ Cell _____ Cell (2) _____

Emergency Contact _____ Phone _____

Participant/Vehicle Release

My child(ren) has my permission to participate in all activities involved with flag football. If attempts to contact me at the above listed phone #'s are unsuccessful. I authorize and give my consent for any emergency medical, surgical or dental treatment for my child (listed above) anywhere/anytime should it be deemed advisable by a qualified medical Doctor or Dentist, and the transportation of the child to the nearest hospital reasonably accessible. I understand this is to avoid undue delay and to assure prompt attention/treatment in an emergency. I authorize the City of Columbus to take all necessary steps to insure my child's health & safety in case of an emergency and to administer any needed medications. In case of accident or injury I will not hold the City of Columbus or its employees responsible. I understand and assume all risks that may occur during my child's participation in this program. I understand that should any injury occur to my child, I will be responsible for all medical treatment and other costs through my medical insurance policy and/or personal finances.

I permit my child(ren) to ride in a Columbus Recreation and Parks' vehicle for the purpose of transporting to and from games/practices.

Signature _____ Date _____
(parent or legal guardian)

Parents' Code of Ethics Pledge

I hereby pledge to provide positive support, care, and encouragement for my child participating in youth sports by following this PAYS Parents' Code of Ethics:

- I will encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game, practice, or other youthsports event.
- 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 require that my child's coach be trained in the responsibilities of being a youth sports coach and that the coach upholds the Coaches' Code of Ethics.
- I will support coaches and officials working with my child, in order to encourage a positive and enjoyable experience for all.
- I will demand a sports environment for my child that is free from 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 help my child enjoy the youth sports experience by doing whatever I can, such as being a respectful fan, assisting with coaching, or providing transportation.
- I will ask my child to treat other players, coaches, fans, and officials with respect regardless of race, sex, creed, or ability.

Adult Rules for Youth Sports:

Make it Fun!

Cheer for Everyone!

Set a Good Example!

I have read and agree to the above Parents' Code of Ethics.

Parent Signature

Parent Signature

Date