

CITY OF FORT WALTON BEACH – PARKS & RECREATION
Program REGISTRATION FORM

<input type="checkbox"/> Softball (850 United and Academy) Month registering for: _____			
<input type="checkbox"/> Multi-Sport (Summer only) Check sport(s) attending <input type="checkbox"/> ALL <input type="checkbox"/> Week(s) __1__2__3__4__5__6			
<input type="checkbox"/> Soccer Camp (Summer only)			
Player's Name:		Date of Birth:	Age: Grade: Male <input type="checkbox"/> Female <input type="checkbox"/>
(PLEASE PRINT) (First & Last) Parent 1 Name:		(In Home) Parent 2 Name:	
Parent date of birth:		Parent 2 date of birth:	
Address:		City/Zip:	Yrs. _____ Experience
Parent 1 Cell:		Parent 2 Cell:	
League (if known) 8U, 10U, 12U, 14U, 16U, 18U and/or Coach: _____			
Parent 1 E-Mail:		Parent 2 E-Mail:	
Emergency Contact:		Phone:	
<p>I/We the parents of the above-named child do hereby give my/our approval to his/her participation in the above-mentioned activity during the current season. I/We do hereby waive, release, absolve, indemnify, and agree to hold harmless the Fort Walton Beach Parks and Recreation Department, the organizers, sponsors, supervisors, participants, and persons transporting to or from activities, for any claim arising out of any injury to my child, except to the extent covered by any accident or liability insurance the child may have.</p> <p>I do hereby accept full responsibility for any item/items that have been loaned to me by the City of Fort Walton Beach. I further agree that should I fail to return these items within seven days after notification to do so, or if the items have been abused while in my custody to the extent that a replacement is required, I will pay to the City of Fort Walton Beach, the replacement cost of such items as may be necessary.</p> <p>I grant the City of Fort Walton Beach, its representatives and employees the right to take and use photographs of me, my property, and my minor child (ren) with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and WEB content.</p>			
THERE WILL BE NO REFUNDS GIVEN ONCE PROGRAMS HAVE BEGUN _____ (initial)			
Signature: _____ (Parent/Guardian)		Date: _____	
Softball: Wendy R. 850-855-1070 Multi-Sport: Matt P. 850-699-3049 Soccer: Tim A. 850-642-1572			