

PAL Registration Form-Check one: Scholarship ___ Cash ___

Name: _____ DOB: ___ / ___ / ___ AGE: _____

Address: _____ City: _____ ZIP _____

M/F (circle one)

Grade: _____ School: _____ Email: _____

Parent/Guardian Name: _____

Home Phone: _(_____) _____ Work Phone: _(_____) _____

Sport: (circle one) Football Baseball Basketball Other Team

Name: _____ Division: (age group) _____ Is

Your child eligible for reduced price or free meals at school? Yes ___ No ___

MINOR WAIVER and RELEASE OF LIABILITY:

In consideration of being able to participate in the activities of Denver Police Activities League; I, as a parent, legal guardian, or agent of the above named participant for myself, my heirs, personal representatives and assigns: 1. Represent that the participant and I understand in the nature of the activity in which the participant will be engaging in may involve substantial and serious risk and dangers for property damage and bodily injury, including, without limitations, permanent disability, paralysis, and death. Such risks, and dangers may be caused by among other factors, action or inaction of the participant, action or inaction of others (including, without limitation, other participants, supervisors, or coaches), the condition and which and activity takes place, the condition of the premises on which an activity occurs, the condition of any equipment used in an activity, or the negligence of the releases name below:

2. Release, discharge, covenant not to sue and agree to indemnify and hold harmless, the Denver Police Activities League, their respective officers, directors, employees, volunteers, agents and corporate sponsors. (each considered to be one of the "releases") from all liabilities, claims, demands, losses, and damages arising, directly or indirectly out of this activity, whether or not caused or alleged caused in whole or in part in by the negligence of any of the releases.

I give permission for participation in this program. I have read and understand the above waiver & release and agree to all the terms and conditions stated within, to witness thereof, I have caused my signature to be affixed to this document.

Signature of Parent/Guardian Date

CONSENT FOR EMERGENCY MEDICAL TREATMENT OF A MINOR

I GIVE MY CONSENT FOR ALL EMERGENCY MEDICAL CARE prescribed by a licensed physician for the player identified above. Care may be given under whatever conditions are necessary to preserve the life, limb, or well being of my dependent (the participant). I and the registrant release, discharge, and otherwise indemnify the Denver Police Activities League, their respective officers, directors, employees, volunteers, agents and corporate sponsors, owners/providers of fields utilized by the program (each considered to be one of the "releases") from all liabilities, claims (by or on behalf of the registrant), demands, losses, and damages arising, directly or indirectly out of this activity, whether or not caused in whole or part in by the negligence of any of the releases. I, as parent/guardian have received, read, and willfully agree to and understand all terms and conditions stated herein.

Signature of Parent/Guardian Date

AGREEMENT FOR PARTICIPATION

1. I understand that my child will not be eligible to participate in Denver PAL activities, if any portion of this form is altered or falsified.
2. I agree that any PAL owned uniform or equipment issued for participation in this activity must be returned at the end of the season. I understand that if it is not returned I will be held responsible for the replacement cost.
3. I will encourage good sportsmanship by demonstrating positive support and respect for all players, coaches, and officials and other spectators at every game, practice, and other activity.
4. I will place the emotional and physical well being of my child ahead of my personal desire to win. I will refrain from the use of profanity at practices, games, and other activities and I will be a positive role model. I will remember that THE GAME IS FOR THE KIDS, not the adults. I understand that I may be asked to leave PAL-sponsored events if PAL staff judges my behavior to be unsuitable. Failure to do so could result in suspension of me or my child, ejection, or even arrest.
5. I will support a sports environment for my child that is free of drugs, alcohol, and tobacco, and I will refrain from use at all youth activities.
6. I agree to this code of conduct and participation, and understand if not followed could result in restriction of attendance at PAL activities.

Signature of Parent/Guardian Date!