



2010/2011 Boy's Basketball Program
Registration Form



Name: Preferred Name:
Address: City: State: Zip:
Phone #: Age (As of Sept. 1, 2010): Date of Birth:
E-Mail

T-Shirt Size (Circle One): Youth Small Youth Medium Youth Large
Adult Small Adult Medium Adult Large Adult X-Large

Grade: Name of Coach & Team:

Parents/Guardian's Name:

Employer (Mother): Employer (Father):

Work Phone#: Work Phone #:

Emergency Contact: Relationship:

Phone #:

Medical Information

Family Physician: Phone #:

Allergies/Medication/Disabilities:

Insurance Company: Policy #:

\*\*\*BIRTH CERTIFICATE IS REQUIRED WITH THIS FORM\*\*\*

AUTHORIZATION FOR RELEASE

I hereby give my permission for (name of participant/child/ward) to participate in this program/activity conducted by the Tuscaloosa County Park & Recreation Authority (PARA). I assume all risks and hazards incident to such activities and transportation to and from the same. I release, discharge, and acquit PARA and all of its agents, servants, employees, staff and personnel from and with respect to all claims, causes of action and rights of recovery which I have, or might have at any time in the future as a result to any property damage or bodily injury suffered by said child/ward during the course of any such activities. Additionally, I agree to indemnify and hold harmless PARA and the employees from and against any and all claims, suits, damages, judgements, attorney fees and expenses of every kind on account of property or bodily injury, including death, suffered or experience by me or my said child/ward occurring during, or in any way resulting from any of said activities, whether or not cause by a negligent acts (except as may be occasioned by gross or wanton employees) or omission of any sort by PARA employees. I authorize PARA and employees to render any medical care and treatment to my said child/ward deemed necessary with respect to any illness or injury occurring during any PARA activities. I fully understand that PARA has NO ACCIDENT or MEDICAL PAYMENT INSURANCE COVERAGE for the participant/child/ward and I agree to play all medical costs incurred if treatment is obtained. I understand that PARA assumes no responsibility or liability for lost, stolen, or misplaced items. I also give permission for PARA to take photographs and/or videos of my child during activity for publicity use. Furthermore, please take caution when sending valuable, sentimental items with child/ward to any activities. PARA accepts NO RESPONSIBILITY for lost or stolen items. This instrument is signed both on behalf of the individual and the child/ward.

Signature: Date:

It is the policy of Tuscaloosa County Park & Recreation Authority that no person shall, on the basis of face, color, creed, religion, sex, age, national origin or disability be denied employment, be excluded from participation in, be denied the benefits of, or be subjected to discrimination in any program or activity.

Please return completed registration form with check or cash to any PARA Center: Belk, Hughes, Phelps, McAbee, or Downtown office

For more information, call (205) 562-3200

FOR OFFICE USE ONLY: Rec # Amt Paid \$ Date Location



**Parents Code of Conduct**  
**Please read and Sign Below:**

1. I promise never to force my child to participate in any sport.
2. I will remember that the sport is for recreation purposes and my child is playing to have fun.
3. I promise to treat all players, coaches, officials, other parents, and spectators with respect at all times.
4. I will not resort to unsportsmanlike conduct, such as using profanity, offensive gestures or remarks, boastful celebrations, or taunting at any time.
5. I promise to never yell at a participant or my child for a mistake or losing the game.
6. I promise to respect and support the decisions of coaches and officials and to never confront authority during or after a game.
7. I promise to be a role model for individuals involved in any sport.
8. I promise to support all players and their involvement in the sport, emphasize skills and team practices, and praise players so that a child will never feel defeated by the outcome of a game.
9. I will teach my child to never resort to violence to resolve a conflict.
10. I will not coach any players, including my child, during games or practices unless I am an official team coach.
11. I will support and help maintain an environment that is drug-free, alcohol-free, and tobacco-free at all times.
12. I will do my best to support all participants and others involved in the game at all times.
13. I am responsible for any guest at the game and will make them aware of this Code of Conduct.
14. I understand that my attendance at this event is a privilege, not a right, and may be suspended if I refuse to support this code.
15. I understand I am not allowed to address the officials/umpires during the game. All comments and concern about officiating will be handled by the coach.

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Signature of Parent/Guardian      Date

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Signature of Parent/Guardian      Date