## SPIRIT LAKE PARKS & RECREATION

## **REGISTRATION FORM**

6042 W. Maine Street PO BOX 309 Office (208) 623-2131 Fax (208) 623-6463 Spirit Lake, ID 83869 www.spiritlakeid.gov/parkandrec/

Participant: First Name		L	ast Name				
Address:		•	City/Zip Code				
Home Phone:	Cell:	Email:		Date of	Birth:	Shirt size :	
Captain	Team Sponsor	s					
Adult, Coed  Kickball  Softball  Soccer  Volleyball  ** must also fill out the team roster  **must pay individual and entire team if applicable.		All Registrations  Entire Team (Kickball) (Softball) (Soccer) (Volleyball) (Snowshoe Soft	\$ \$ \$ \$ tball) \$	28.00 <b>REQ</b> 250.00 500.00 500.00 250.00 200.00	o City of Spirit Lake)		
			Late Fee  AMOUNT DUE	\$ : <b>\$</b>	15.00		
I hereby agree to participate (or allow my child to participate) in the ABOVE NAMED PROGRAM WHICH IS a recreational and educational activity to be conducted by the City of Spirit Lake and do hereby acknowledge that such participation presents risks, some of which are unknown; I agree to assume all risks associated with such participation. I do, on behalf of my child/ward and any person who may have an interest in his/her well-being or property, hereby release and forever discharge the City of Spirit Lake, Idaho, its agents, servants, employees and cooperators from any and all real possible claims for damages or other harm to person or property, regardless of the manner by which any such claim may be brought. I accept the terms of this complete and total release and agree to be bound by it of my own free will. I hereby consent to first aid, emergency, medical care, and authorize, if necessary, admission to a hospital for treatment of injuries that myself or my child/ward could sustain while participating in this program. I understand that I am responsible for any and all medical expenses which may be incurred as a result of any accident or illness while participating in the program. I am the parent or legal guardian or the above-named participant, who is referred to in this agreement as child/ward. My approval of this agreement means that I cannot later bring a claim for damages against the City of Spirit Lake and/or any cooperators in this program.  Signature of Participant:							
PRINT NAME:				Date:			

The City of Spirit Lake Parks & Recreation Department expects full payment at the time of registration or reservation. At this time, we do not accept credit cards or debit cards. Payments are accepted only by cash or checks. Checks should be made payable to the CITY OF SPIRIT LAKE. Registrations are taken on a first come first serve basis until full; all others will be placed on a waiting list. To be placed on the waiting list you must submit payment in full & a signed registration form. There is no guarantee that a space will become available.

<sup>\*\*</sup>By signing this form you have given Spirit Lake Park and Recreation the right to publish pictures of yourself and/or your child to promote activities. If you do not approve please indicate in the space below.