

# ADULT SPORTS REGISTRATION FORM



**PARTICIPANT INFORMATION** (*Please Print*):

315 E. 9<sup>th</sup> Ave.  
(405)747-8070

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex (circle one): **M** **F**

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Other Phone: \_\_\_\_\_

City Limits Resident? (circle one): **YES** **NO** Sport (circle one) : Softball Volleyball Basketball

Team Name & or Coach: \_\_\_\_\_

### INCLUSION STATEMENT

The Stillwater Parks & Recreation Department is committed to an inclusive approach to recreation. Inclusion refers to a philosophy that goes well beyond non-discrimination and takes a proactive approach to including all people in all programs and services. If you have a need for reasonable accommodations and/or financial assistance, please call the Program Manager at 405-533-8505.

### RELEASE OF CLAIM FOR PERSONAL INJURY AND PROPERTY DAMAGE

The undersigned agree that the City of Stillwater and the Parks & Recreation Department or any of its agents, agencies, boards or staff, shall be released from liability, claims, or demands whatsoever in the event of any accident or injury to said participant resulting directly or indirectly from their participation in a Stillwater Parks & Recreation program or activity.

### CONDUCT STATEMENT

Abusive or insulting remarks to or about umpires, scorekeepers, supervisors of the program, coaches, fans or players are prohibited. Violation of this is suspension from attending Parks & Recreation programs until reinstated by the Program Manager. Furthermore, I understand that by signing this form I accept the purpose and philosophy of the program.

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date

Registration is **REQUIRED** for **all** participants to participate in any sports programs, **NO** exceptions.