**SPORTS REGISTRATION FORM**

**SPORT**

**DIVISION**

<table>
<thead>
<tr>
<th>UNIFORM SIZE</th>
</tr>
</thead>
<tbody>
<tr>
<td>CIRCLE ONE</td>
</tr>
<tr>
<td>YOUTH:</td>
</tr>
<tr>
<td>SM  MED  LRG</td>
</tr>
<tr>
<td>ADULT:</td>
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<tr>
<td>SM  MED  LRG</td>
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<tr>
<td>XL  XXL</td>
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</tbody>
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**PLAYER**

- **Last Name_____________________________  First Name______________________**
- **Male □  Female □**
- **Birthdate___ /___ /___ Age_____ Grade_____ Height_____ Weight_____ School_________**
- **Are you a returning player? □ Yes □ No If yes, Team____________ Division_____________**
- **Do you have a brother or sister playing in this same age division? □ Yes □ No Age ____________**
- **If yes: Name____________________________________________________________________**
- **Same team privileges will only apply to siblings**

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**GENERAL**

- **Address_______________________________________ City______________________________ Zip Code____________**
- **Parent/Guardian__________________________________________________ Home Phone____________________________**
- **Work Phone________ Cell Phone________ Email____________**
- **Emergency Contact Name________________________________ Home Phone____________________________**
- **Work Phone________ Cell Phone________ Email____________**

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**Please check below if you are interested in helping with one of the following:**

- □ Coach  □ Assistant Coach  □ Volunteer  _______ _______ _______ Team

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**How did you hear about this program? □ Mail □ Newspaper □ Friend/Relative □ School □ Phone Inquiry □ Other__________________________**

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**PARENT CONSENT FORM**

I, the undersigned, give permission for my child, whose name appears above, to participate in the ELYSIAN VALLEY athletic program. I understand the nature of sports activities and the minor’s experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity. I agree to relieve the City of Los Angeles Department of Recreation and Parks, its officers and employees from any liability in connection with any injury to my child in connection with this league. I understand that the Recreation Facility CARRIES NO INSURANCE.

I, the undersigned parent of, a minor, do hereby authorize ELYSIAN VALLEY as agents for the undersigned to consent to X-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or specialized supervision of any physician licensed under the provisions of the Medical Practice Act on the staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or a said hospital. It is understood that this authorization is given in advance of any such diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable. This authorization shall remain effective for the duration of the program, unless revoked sooner in writing and delivered to said agent.

**Signature________________________________________________________**

**Date________________________________**

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**PARENT’S OATH TO KIDS**

I PROMISE TO DEMONSTRATE GOOD SPORTSMANSHIP BY BEING A POSITIVE ROLE MODEL AND ENCOURAGING YOU TO PLAY AND HAVE FUN WHILE SUPPORTING YOU AND YOUR TEAM IN BOTH VICTORY AND DEFEAT.

**Parent/Guardian Signature____________________  Date________ Parent/Guardian Signature____________________  Date________**

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**RR NUMBER**

**AMOUNT**

**RECEIVED BY (Initial)**

**AGE VERIFIED (Initial)**

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**CIRCLE ONE**

**YOUTH:**

**SM  MED  LRG**

**ADULT:**

**SM  MED  LRG**

**XL  XXL**
PARENT'S CODE OF CONDUCT

I hereby pledge to live up to my responsibilities as a Parent of a child participating in the Department of Recreation and Parks Sports Program by following the Parents Code of Conduct.

1. I will place the emotional and physical well-being of the children above any personal desire to win. I will help my child understand the valuable lessons sports can teach.
2. I will be a role model of good sportsmanship and character. I will help my child meet his/her responsibilities to the coach and the team.
3. I will do my best to make sure that the game is fun for all participants.
4. I will lead by example in demonstrating fair play and sportsmanship to all participants. I will treat participants, coaches, recreation administrators, and the public with respect.
5. I will help maintain a sports environment for all participants that is free of drugs, tobacco, and alcohol and will refrain from their use at all youth sports events.
6. I will make only positive and encouraging comments to players on both teams. I will not interfere or coach from the stands.
7. I will remember to not take the game or myself too seriously.
8. I will strive to create a positive recreational experience to everyone involved in the activity.
9. I will remember that I am a youth sports parent, and that the game is for the children and not adults. Accordingly, I will encourage my child to play sports by providing a supportive atmosphere, but not pressure.
10. I will discuss the significance of this code with my family members.

“I understand that the penalties for not adhering to this Code of Conduct may range from a verbal warning to me or my child’s suspension or expulsion from the activity.”

_________________________  ____________________  __________________
PARENT/GUARDIAN SIGNATURE                FACILITY                                 DATE

PLAYER’S CODE OF CONDUCT

I hereby pledge to live up to my responsibilities as a player participating in the Department of Recreation and Parks Sports Program by following the Players Code of Conduct.

1. I will play by the rules and never argue or complain about the official’s decisions.
2. I will be a role model of good sportsmanship and character. I will meet my responsibilities to the coach and the team.
3. I will play for the fun of it, and do my best to make sure that the game is fun for all the participants.
4. I will in demonstrate fair play and sportsmanship to all participants. I will treat participants, coaches, recreation administrators, and the public with respect.
5. I will refrain from the use of drugs, tobacco, and alcohol at all youth sports events.
6. I will make only positive and encouraging comments to players on both teams. I will be a good sport by cooperating with my coaches, teammates, opponents, and officials.
7. I will remember that the goals of the game are to have fun, improve my skills and feel good about playing. I will not take the game or myself too seriously. I will control my temper.
8. I will work equally hard for the team as for myself, and will always give my best effort.
9. I will remember that I am a youth sports player, and that the game is for my enjoyment and skill improvement.
10. I will demonstrate good sportsmanship.

“I understand that the penalties for not adhering to this Code of Conduct may range from a verbal warning to my suspension or expulsion from the activity.”

________________________  ____________________  __________________
ATHLETE SIGNATURE                                   FACILITY                                    DATE