





GRYD Summer Night Lights 2024 YOUTH - Sports Registration Form

SPORT: Basketball Soccer DIVISION:		
Parent(s) Name(s):		
Youth Name (First & Last):	Birthdate:///	_Age: Sex:
Address:	_City:	_Zip:
Emergency Contact Name:	Phone Number: ()	
Jersey Size:		
Youth S Youth M Youth L Youth XL Adult S Adu	lt M Adult L Adult XL Adu	lt 2XL Adult 3XL
Ethnicity: African American Asian American Caucasian	Latino Native American	Other:

I understand that as a registered participant of an SNL sports league I will receive one (1) jersey, to be distributed by the Recreation and Parks SNL Coordinator. **Participant Initials**_____

PARENT/GUARDIAN CONSENT for Participation of a Minor in SNL Sports Medical Care

I, the undersigned, give permission for my child, whose name appears above, to participate in the Summer Night Lights athletic program and/or Skateboard/In-line Skate Park. I understand the nature of the 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 Mayor's Office of Gang Reduction and Youth Development Summer Night Lights program, City of Los Angele,sand Department of Recreation and Parks, its agents, officers, and employees from any liability in connection with any injury to my child in connection with participation in any Summer Night Lights related sports activities.

I understand that neither the Mayor's Office of Gang Reduction and Youth Development, nor the Recreational Facility CARRIES INSURANCE. I do authorize the Mayor's Office of Gang Reduction and Youth Development, City of Los Angeles, and Department of Recreation and Parks, its agents, officers, and employees to act as an agent for my child, listed above, and consent to X-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is 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 judgment may deem advisable. The authorization shall remain effective for the duration of the program, unless revoked sooner in writing and delivered to said agent.

Signature of Parent/Guardian:	Date:	
Signature of Parent/Guardiant.	 Date	

Parent/Guardian/Player CODE of CONDUCT

I hereby pledge to live up to my responsibilities as a parent of a child participating in the Summer Night Lights Sports program by following the parent/guardian/player's code of conduct.

As a parent/guardian I will place the emotional and physical well-being of the child above any personal desire to win.

As a parent/guardian I will help my child understand the valuable lessons sports can teach. I will be a role model of good sportsmanship and character.

As a parent/guardian I will help my child meet his/her responsibilities to the coach and the team.

As a parent/guardian I will not interfere or coach from the stands. I will be a good sport by cooperating with my coaches, teammates, opponents and officials.

As a parent, I will remember that I am a youth sports parent/guardian, and that the game is for children and not adults. Accordingly, I will encourage my child to play sports by providing a supportive atmosphere, but not pressure.

As a player I will play by the rules and never argue or complain about the official's decisions.

As a player I will play for the fun of it and do my best to make sure that the game is fun for all participants. 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. I will help maintain a sports environment for all participants that is free of drugs, tobacco, and alcohol, and I will refrain from their use at all youth sports events. I will make only positive and encouraging comments to players on both teams.

As a player I will remember that the goal of the games are to have fun, improve skills and feel good about playing. I will not take the game or myself too seriously, I will control my temper. I will strive to create a positive recreational experience for everyone involved in the activity.

I will discuss the significance of this code of conduct with my family members. I understand that the penalties for not adhering to this Code of Conduct may range from a verbal warning to expulsion from the activity.

Signature of Parent/Guardian: _____

Signature of Player:_____

Date: _____

Media/Use of Image

I hereby grant the Mayor's Office of Gang Reduction and Youth Development Summer Night Lights program, the City of Los Angeles and the Department of Recreation and Parks permission to use my son's/daughter's likeness in photograph(s)/video in any and all kinds of its publications, promotional materials or on the Internet, without any further authorization, now or in the future, in perpetuity. I will make no monetary or other claim against the aforementioned entities for the use of my image in photographs or video.

Signature of Parent/Guardian: _____

Date: _____