

CITY OF LOS ANGELES DEPARTMENT OF RECREATION AND PARKS

GPLA SPORTS REGISTRATION FORM

Facility <u>Jim Gilliam Recreation Center</u>	Uniform Size: Small Med Large XLarge 2XLarge 3XLarge
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SPORT <u>Girls' Volleyball</u>	DIVISION <input type="checkbox"/> Minors (Ages 8-10) <input checked="" type="checkbox"/> Majors (Ages 11-12) <input type="checkbox"/> Juniors (Ages 13-15)	(GPLA)
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P L A Y E R	Last Name _____ First Name _____
	Birth date ___/___/___ Age ___ Grade ___ Height ___ Weight ___ School _____
	Are you a returning player? Yes No If yes, Team _____ Division _____
	Do you have a sister playing in this same age division? Yes No
	If yes: Name _____ Age _____

Same team privileges will only apply to siblings

G E N E R A L	Address _____ City _____ Zip Code _____
	Parent/Guardian _____ Home Phone (____) _____
	Work Phone (____) _____ Cell Phone (____) _____ Email _____
	Emergency Contact Name _____
	Work Phone (____) _____ Cell Phone (____) _____ Home(____) _____

Please circle below if you are interested in helping with one of the following:
Coach Assistant Coach Volunteer

How did you hear about this program? Mail Newspaper Friend/Relative School Phone Inquiry Email Facebook Other _____

PARENT CONSENT FORM

Parent Consent: I give permission for my child, whose name is listed below, to participate in the Jim Gilliam Recreation Center GPLA Program. I authorize the City to make, procure or use photographs, film, tapes or other likenesses or Minor's physical image and/or voice as may be needed for use with program's publicity material. I agree to hold harmless the City of Los Angeles, Department of Recreation and Parks. **I understand that the City of Los Angeles carries no insurance.** I also understand the _____ reserves the right to dismiss a child for any conduct detrimental to the program.

AUTHORIZATION OF CONSENT TO TREATMENT OF A MINOR AT AN AUTHORIZED HOSPITAL IN CASE OF EMERGENCY, ILLNESS OR ACCIDENT:

I (We) the undersigned, parent(s) of the Minor, whose name is listed above, do hereby authorize Jim Gilliam Recreation Center as agent for the undersigned to consent to any x-ray examination, anesthetic, medical or surgical diagnosis, or treatment and hospital care which is deemed advisable, and is to be rendered under the general or special supervision of any physician or surgeon licensed under the provision of the Medical Practice Act on the medical staff of a licensed hospital whether such diagnosis or treatment is rendered at the office of said physician or at the said hospital. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but it is given to provide authority and power on the part of aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable.

Signature _____ Date _____

PARENTS' 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 _____

RR NUMBER	AMOUNT	RECEIVED BY (Initial)	AGE VERIFIED (Initial)

BE A GOOD SPORT

PLAYER'S CODE OF CONDUCT

I hereby pledge to live up to my responsibilities as a Player participating in the Department of Recreation & Parks Sports Program by following the Player's Code of Conduct

1. I will play by the rules, and refrain from arguing or complaining about the official's decisions.
2. I will be a role model of good sportsmanship and character and 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 participants.
4. I will demonstrate fair play and sportsmanship. I will treat participants, coaches, recreation administrators, and the public with respect as I would like to be treated.
5. I will refrain from the use of alcohol, drugs, or tobacco 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 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. As a player, I have rights and responsibilities I will remember that I am a sports player and that the game is for my enjoyment and my skill improvement.
10. I will demonstrate good sportsmanship.

I understand that the penalties for not adhering to this Code of Conduct may range from verbal warning to expulsion from the activity.

PRINT PLAYER'S NAME _____

FACILITY _____

PLAYER'S SIGNATURE _____

DATE _____

BE A GOOD SPORT

BE A GOOD SPORT

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 & Parks Sports Program by following the Parent's 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 public with respect.
5. 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.
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 for everyone involved in the activity.
9. I will remember that I am a youth sports parent, 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.

I understand that the penalties for not adhering to this Code of Conduct may range from verbal warning to expulsion from the activity.

PRINT PARENT'S/GUARDIAN NAME _____

FACILITY _____

PARENT'S/GUARDIAN SIGNATURE _____

DATE _____

BE A GOOD SPORT