



City of Los Angeles Department of Recreation and Parks

LAKE STREET COMMUNITY CENTER

227 N. Lake St. Los Angeles, CA 90026 – 213.207.2196 – lakestreet.communitycenter@lacity.org



### SPORTS REGISTRATION FORM

SPORT: _____	DIVISION: _____
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#### PLAYER INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M / F  
 Birthdate: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_\_\_ School: \_\_\_\_\_  
 Home Address: \_\_\_\_\_

*\$5 discount per registered sibling (Same team privileges will only apply to siblings)*

#### PARENT/EMERGENCY CONTACT INFORMATION

Parent Last Name: \_\_\_\_\_ Parent First Name: \_\_\_\_\_  
 Best Telephone #: \_\_\_\_\_ ( Text / Call ) Alternate Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

*Email addresses will be used to notify you, the parent, about game times, practices, banquet time and picture day information*

#### PARENT CONSENT FORM / PLAYER INJURY WAIVER / PHOTO CONSENT FORM

I, the undersigned, give permission for my child, whose name appears above, to participate in the LAKE STREET COMMUNITY CENTER athletic 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 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 officer agents and employees from any liability in connection with any injury to my child during the basketball clinic or league. I understand that the Recreation Facility CARRIES NO INSURANCE. I, undersigned parent of \_\_\_\_\_ a minor, do hereby authorize LAKE STREET COMMUNITY CENTER as agents for undersigned to X-Ray examination, anesthetic, or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or specialized of any physician licensed under the provision of the Medical Practice Act on the staff of a licensed hospital, 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.

**PARENTS:** As a parent, I promise to demonstrate good sportsmanship by being a positive role model and encouraging my child to play and have fun while supporting every child in both victory and defeat.

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

RECIPT NUMBER	AMOUNT	RECEIVED BY (Staff Initial)	Age Verified (Initial)

# 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 and Parks Sports Program by following the Parent's Code of Conduct

I will place the emotional and physical well-being of the children above my personal desire to win. I will help my child understand the valuable lessons sports can teach.

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.

I will 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. I will not interfere or coach from stands.

I will remember to not take the game or myself too seriously.

I will strive to create a positive recreation experience for everyone involved in the activity.

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 supportive atmosphere, but not pressure.

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

PARENT'S SIGNATURE \_\_\_\_\_

FACILITY \_\_\_\_\_

DATE \_\_\_\_\_



I Will Demonstrate Good Sportsmanship



# 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 and Parks Sports Program by following the Player's Code of Conduct

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

I will be a role model of good sportsmanship and character. I will meet my responsibilities to the coach and the team. I will demonstrate good sportsmanship

I will play for fun of it, and do my best to make sure that the game is fun for all participants.

I demonstrate fair play and sportsmanship. I will treat participants, coaches, recreation administrators, and the public with respect as I would like to be treated.

I will refrain from the use of alcohol, drugs, or tobacco at all youth sports events.

I will make only positive and encouraging comments to players on both teams. I will be good sport by cheering all good plays, cooperating with my coaches, teammates, opponents and officials.

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.

I will work equally hard for the team as for myself, and will always give my best effort.

I will remember that I am a youth sports player, and that the game is for my enjoyment and my skill improvement. As a player, I have the rights and have responsibilities.

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

PLAYER'S SIGNATURE \_\_\_\_\_

FACILITY \_\_\_\_\_

DATE \_\_\_\_\_



I Will Demonstrate Good Sportsmanship

