

# Intramural Basketball Program



<b>REGISTRANT</b>	Last name		First Name	
	Birthdate (MM/DD/YY)		Gender (check one) <input type="checkbox"/> Male <input type="checkbox"/> Female	
	Email			
	School Attending		Grade	<b># 38179</b>
<b>ADULT</b>	Last Name		First Name	
	Address		City, State	Zip
	Home Phone No. (include area code)	Work Phone No. (include area code)	Emergency Phone No. (include area code)	Cell Phone No. (include area code)

### Payment Information

Method of Payment (check one)	<input type="checkbox"/> Check enclosed (Make payable to Auburn Parks, Arts & Recreation)	<input type="checkbox"/> Credit Card (fill in information below)
CARDHOLDER NAME (please print)		CARD TYPE (check one): <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD
CARD NUMBER		EXP. DATE
CARDHOLDER SIGNATURE		DATE

**Under 18 Parent/Guardian signature required -**

I (we) am/are the parent(s) or legal guardian of \_\_\_\_\_ who desires to be a participant in the City of Auburn's sponsored recreational activity of \_\_\_\_\_. It is important to me (us) that this child be allowed to participate in this activity. I (we) understand there are special dangers and risks inherent in this activity, including but not limited to, the risk of serious physical injury, death or other harmful consequences which may arise directly or indirectly from the child's participation in this activity. Being fully informed as to these risks and in consideration of the City of Auburn allowing my child to participate in this sponsored activity and/or use of Auburn's facilities I (we), on behalf of myself (ourselves) and on behalf of the above-named participant child, assume all risk of injury, damage and harm to the child which may arise from the child's participation in the activities or use of City of Auburn facilities. I (we) further agree, individually and on behalf of the above-named child, to release and hold harmless the City of Auburn, its officials, employees, volunteers and agents and agree to waive any right of recovery that I(we) may have to bring a claim or lawsuit for damages against them for any personal injury, death or other harmful consequences occurring to the above-named child or me arising out of the Child's voluntary participation in this activity. I grant the City of Auburn the right and permission to use or copyright, and re-use, publish, or re-publish photographic pictures, video, electronic images or other reproduction taken during classes for publicity purposes by the Auburn Parks, Arts & Recreation Department.

I (we) grant my (our) full and voluntary consent for the above-named child to participate in the activity described above.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*Disclaimer - this event / activity is not being sponsored by the school district, and the district assumes no responsibility for the conduct or safety of the event/activity. In consideration for the privilege to distribute these materials, the Auburn School District shall be held harmless from any cause of action, claim or petition filed in any court or administrative tribunal arising out of the distribution of these materials, including all costs, attorney's fees and judgments or awards.*

Official Use Only		
Date Paid	Staff	