



# 2022 Youth Kickball Registration Form

Snellville Parks and Recreation Department

Visit our website at [www.snellville.org](http://www.snellville.org) and [www.facebook.com/SnellvilleParks](https://www.facebook.com/SnellvilleParks)

PLEASE PRINT NEATLY

PARTICIPANT NAME: \_\_\_\_\_ GENDER: M F AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY & STATE: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ COUNTY: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_

**PLEASE PROVIDE A VALID CONTACT NUMBER AND/OR EMAIL. IN THE EVENT OF CANCELLATIONS OF PRACTICES/GAMES, WE WILL CONTACT YOU VIA PHONE OR EMAIL LISTED.**

PLEASE CHECK THE BEST FORM OF CONTACT: EMAIL  PHONE

Parent Name(s): \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

Interested in volunteer coaching (circle)?: Yes No

Medical considerations for child: \_\_\_\_\_

Siblings: \_\_\_\_\_

Fee: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Total Amount Paid: \_\_\_\_\_

Receipt #: \_\_\_\_\_ Employee \_\_\_\_\_

I understand that fees are due with registration papers. I understand that Snellville Parks and Recreation, SPRD, adheres to a strict no refund policy within 10 days of the start of season. I, the parent/guardian for the above named child, do hereby give my approval for his/her participation in the above, and I assume all risks and responsibilities for the child. I waive all claims against the sponsor, SPRD, its staff, board and city officials. **If my child is experiencing COVID symptoms, I will not bring them to games.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**Signature indicates you have read and understand the guidelines on the back of this form.**

## **Snellville Parks and Recreation 2022 Youth Kickball League**

- Youth Kickball will run on Friday evenings for the following dates: September 16<sup>th</sup>, 23<sup>rd</sup>, 30<sup>th</sup> & October 14<sup>th</sup>, October 21<sup>st</sup> & October 28<sup>th</sup>. Rain out dates include November 4<sup>th</sup> and 11<sup>th</sup>. \*October 7<sup>th</sup> is skipped for Fall break
- Payment of \$45 per child is due with registration form. We accept cash, check and credit card. Checks can be made to Snellville Parks and Recreation. Registrations are to be done at the Park office at Briscoe Park: 2500 Sawyer Pkwy Snellville, GA 30078. Office hours are Monday-Friday 8:00am-5:00pm. We also have an after-hours drop box
- Schedules will be posted/sent to parents once registration is completed (times will depend on how many registrants per age group). Schedules will be posted at [www.snellville.org/parks-recreation](http://www.snellville.org/parks-recreation) and will be under athletics—youth—kickball
- There will be a 15-20 minute practice/warm up before each game
- Age groups include 6u, 9u, 12u, 15u. Player age classification for this season shall be determined based on the player's age as of January 1 2023.
- This is a start-up program so we need parents to volunteer for coaching/umpiring
- We do not give refunds inside of (10) calendar days of league start date, unless the league is cancelled due to lack of enrollment. A \$10 refund processing fee is deducted from the refund, unless the league is cancelled.
- No special equipment is needed: just bring water for your child
- If your child is wearing cleats please make sure they are not metal spikes
- Rain out number is 770-985-3592

**COMMUNICABLE DISEASE  
RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT**

In consideration of being allowed to participate in any way in the program, related events, and activities, I the undersigned, acknowledge, appreciate, and agree that:

I am aware that participation includes potential risks to me of exposure directly or indirectly arising out of, contributed to or by, or resulting from an outbreak of any communicable disease, including, but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19), and/or any mutation or variation thereof.

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, **HEREBY RELEASE, COVENANT NOT TO SUE, DISCHARGE, INDEMNIFY, AND HOLD HARMLESS GEORGIA STATE SOCCER ASSOCIATION, INC.**, and its officers, directors, officials, agents, employees, other participants, sponsors, advertisers, its member affiliates and, if applicable, owners and lessors of premises used to conduct any sponsored or sanctioned event ("Releasees"), from any and all claims, demands, losses, damages, and liability arising out of or related to any **ILLNESS, INJURY, DISABILITY OR DEATH** I may suffer, **WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE**, to the fullest extent permitted by law. Notwithstanding the risks associated with any communicable disease, including, but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19), and/or any mutation or variation thereof, which I readily acknowledge, I hereby willingly choose to participate and assume the risk of doing so.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

X \_\_\_\_\_ Player/Participant's Age \_\_\_\_\_  
Player/Participant's Name

X \_\_\_\_\_  
Player/Participant's Signature Date

**FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE (UNDER AGE 18 AT TIME OF REGISTRATION)**

This is to certify that I, as parent/guardian with legal responsibility for this participant, have read and explained the provisions in this waiver to the participant, including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, the participant and I understand and accepts these risks and responsibilities. I, for myself, my spouse, and the participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liability arising out of or relating to the minor participant's involvement or participation in these programs as provided above, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES**, to the fullest extent permitted by law.

X \_\_\_\_\_ Player/Participant's Age \_\_\_\_\_  
Player/Participant's Name

X \_\_\_\_\_  
Parent/Guardian Signature Date Emergency Phone Number(s)