

Circle the activity of your choice



Baseball
Boys 7-15 yrs. old



Softball
Girls 7-15 yrs. old



Tee-Ball
Girls & Boys 5-6 yrs. old



Football
Boys 7-12 yrs. old



BiddyBasketball
Girls & Boys 5-15 yrs. old

Only registered players will be evaluated.

Year _____

Girl Boy Cust. # _____

Players Information

Played with CRD in past? Yes No

Child's last name _____ First name _____

DOB _____ Age _____ School _____

Physical address _____ Zip. _____

Mailing address (if different) _____ Zip. _____

Mother's name _____ Father's name _____

Home phone _____ Work phone(s) _____

Mom's cell phone _____ Dad's cell phone _____

Physician's name _____ Physician's phone _____

Emergency contact name _____ Emergency contact phone _____

Uniform Size, circle one — Youth S M L, Adult S M L XL

I would like to volunteer for— Head Coach Asst. Coach Team Scorekeeper

Registration fee—

Inside City limits \$55.00, Outside City Limits \$100.00, Financial assistance available, must qualify.

Make Check payable to: City of Covington, P. O. Box 778, Covington, LA 70434

Waiver of Liability

The undersigned parent/guardian (s), both individually, and on behalf of the minor named above, do hereby release and waive any rights and causes of action, for damages, of any nature, what-so-ever, that may have, or may arise against Covington Recreation Department sports administrator, directors, agents, coaches, and employees, as a result of any accidents or injury involving their minor child, while participating in activities sponsored by Covington Recreation Department.

Further, the undersigned parent/guardian (s), both individual, and as the parent/guardian (s) of the minor child above, do hereby authorize the Covington Recreation Department and its representatives, to seek and authorize medical care for their minor child.

Parent's signature _____ **Today's date** _____

A physical exam, and a completed physical form are necessary to complete registration for Football only.

FOR OFFICE USE ONLY:

Fee paid yes no amount _____ check # _____ date paid _____

Assistance Approved yes no Approved By _____

Please read and sign Parent's Code of Ethics

Covington Recreation Department Parents Code of Ethics and Code of Conduct.

I pledge to provide positive support, care and encouragement for my child participating in youth sports by following this parents code of ethics.

I will encourage good sportsmanship by demonstrating positive support, for all players, coaches, and officials, at every practice and game.

I will place the emotional and physical well being of my child ahead of any personal desire to win.

I will provide support for coaches and officials working with my child, to provide a positive, enjoyable experience for all.

I will remember that the game is for children, and not adults.

I will do my very best to make youth sports fun for my child.

I will ask my child to treat other players, coaches, fans, and officials with respect, regardless of race, creed, sex or ability.

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1. No drugs and/or alcohol at practice or games at any time.
2. I recognize that Coaches, Referees and Players are not perfect and I will not harass them during or after the game.
3. I want a Recreation Department that cares and respects its program.
4. Parents will not curse while at the games, in the parking lots or at any CRD function.
5. Parents will address their concerns to their Head coach, CRD director or WST league officials, or board, in an attempt to resolve their concerns.
6. Parents will always cooperate with game officials,—in their duties of progressing games along, in an orderly, efficient fashion—by honoring their request for assistance. No parent is allowed to address an official with comments or questions during a game.

It is understood that one parent/guardian's signature represents the agreement of both parent/guardian's to follow these guidelines.

Parent's name _____
(please print)

Parent's signature _____