

Mt. Zion Recreation Department

Registration Form

www.mtzionrec.com

Uniform
Issue _____

Age Group: _____

Returned _____

Paid Date: _____

Child Name: _____

Age: _____

Address: _____

City: _____

Home Phone: _____ Cell: _____

Work: _____

Date of Birth: _____ Sex: _____

Weight: _____

Parents or Guardians: _____

School Attending: _____

List any significant illness/operations and special medications: _____

In case of an emergency and parents/guardians cannot be reached, please contact:

_____ Phone: _____

I hereby give my permission for the above minor to participate in the following activity:

_____ during the _____ season. Due to the cost of uniforms and equipment provided for my child, I certify that I will return all such equipment and uniforms to the **Mt. Zion Recreation Department** clean and in good repair on or before the required date or I will pay a replacement cost. I acknowledge that my failure to comply with these rules will result in my child's ineligibility to participate in any subsequent activity through the **Mt. Zion Recreation Department** until such time that reimbursement is made. Replacement cost is **\$ 200.00** (After Uniforms have been ordered/issued no refunds will be given.) I hereby authorize and will be responsible for payment of such physician or medical staff as the **Mt. Zion Recreation Department** may designate to carry out minor medical or surgical treatment and/or medication necessary to my child/ward to the emergency room of the nearest hospital. I further authorize the hospital and its medical staff to provide treatment deemed necessary by them for the well being of my child/ward. It is understood, however that if hospitalization or treatment of a more serious nature is required, I will be contacted, if at all possible by telephone for permission. The Physicians, organizers, director, agents or employees of the **Mt. Zion Recreation Department** are hereby released, acquitted and discharged from any claim or suit by reason of injury, illness or damage to person or property during the event or programs, and in that regard, I hereby covenant that of behalf and for the minor not the file a claim or bring suit with respect to any such injury or damage. I, then understand the provisions of the above release and have explained them to said minor. I hereby agree that I and said minor will be bound thereby:

Parent/Guardian Signature

_____ I do not want insurance coverage

_____ I do want insurance coverage

Date Paid: _____

Amount Paid: _____

Received from: _____

_____ Cash _____ Check # _____

Amount Due: _____

Received by: _____

_____ I will allow MZRD to put my child's name and/or image on web page