

DAWSON COUNTY PARKS & RECREATION
Youth Sports Registration Form



706-344-3646 • 706-344-3647 (Fax) • recreation@dawsoncounty.org

Participant Information

Full Name: \_\_\_\_\_ Gender: M F

DOB: \_\_\_/\_\_\_/\_\_\_ Age as of Jan 1st (year season ends)\*: \_\_\_\_\_ \*The age of the participant as of January 1st of the year the season ends determines age eligibility for wrestling.

How did you hear about this activity registration? \_\_\_\_\_

Medical concerns, disabilities, or comments: \_\_\_\_\_

Table with 4 columns: SINGLET SIZE, YOUTH, ADULT, and weight categories (Sml, Med, Lrg, X-Sml, X-Lrg, 2X-Lrg, 3X-Lrg).

NOTE: Registration fee DOES NOT INCLUDE required shoes, headgear, or USA Wrestling Membership.

Parent/Guardian Information

Name: \_\_\_\_\_ County of Residence: \_\_\_\_\_

Street Address, City, Zip (no P.O. Box): \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Please provide an email that is checked on a regular basis. Important updates pertaining to this activity will be emailed to parents.

Parent/Guardian Authorization

X I understand that I will be required to pay an additional fee if a replacement uniform is needed for my child due to a sizing error that is not at the fault of the Parks & Rec. Department or uniform vendor.

I hereby acknowledge that I am familiar with all risks and hazards incidental to participation, and I further hereby assume all risks and hazards incidental to such participation including, but not limited, transportation to and from the activities.

Occasional out-of-county travel is sometimes necessary for Dawson County Parks & Recreation youth sports activities. Siblings playing on different teams, in different age groups, or in different sports may be subject to travel to different locations/counties at the same or overlapping times.

I hereby authorize and consent to the use of the participant's visual image for appropriate purposes, including but not limited to: still photography, videotape, electronic and print publications and websites. I give this consent with no claim for payment.

I understand that payment is due at time of registration unless other arrangements have been made and approved through management. I agree that I have read and understand the Dawson County Parks & Recreation rules, Zero Tolerance Policy, Refund Policy, Georgia Return to Play Act of 2013: "Heads Up - Concussions in Youth Sports", and all policies associated with this activity.

X Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

OFFICE USE ONLY

Reg. Fee: \$ \$50 Late Fee: \$ \_\_\_\_\_ Non-Res Fee \_\_\_\_\_ Fee Waiver: \$ \_\_\_\_\_ Total: \$ \_\_\_\_\_

Cash Receipt: \_\_\_\_\_ Check: \_\_\_\_\_ Credit/Debit Auth: \_\_\_\_\_ Total Paid: \$ \_\_\_\_\_

Staff Authorization: \_\_\_\_\_ Date: \_\_\_\_\_