



CITY OF CHINO
COMMUNITY SERVICES DEPARTMENT

Receipt # _____
Staff Initials _____

2013-14 YOUTH SPORTS WAIVER

CHILD'S NAME: _____ Gender: M / F Age DOB ____ / ____ / ____

NAME OF PARENT/GUARDIAN: _____

ADDRESS: _____ CITY: _____ ZIP CODE: _____

BEST PHONE: (____) _____ E-MAIL _____

* I would like to receive updates, practice information, etc. via text message* Yes: ____ No: ____

PROGRAM (Pee-Wee/Youth League): _____ SPORT: _____

SESSION/DIVISION: _____ NOTES: _____

RELEASE

In exchange for being permitted to participate in any City of Chino activity and/or use any City of Chino facility, I acknowledge and attest to the fact that:

- 1. My participation, and that of my child/children/guardians, is voluntary.
2. My participation, and that of my child/children/guardians, potentially can result in injury, death, property damage and other losses.
3. I am legally competent to understand and accept the associated risks.
4. I will not pursue legal actions against the City for matters arising as a result of my participation, and that of my child/children/guardians.
5. I am responsible for payment of all charges associated with my participation and that of my child/children/guardians, for any damages to City property or other losses of any involved parties.
6. I will defend the City and its representatives against any claims or lawsuits that are a result of my participation, and that of my child/children/guardians.
7. I agree that the City can take photographs and/or film me, and my child/children/guardians, while participating in a City activity and/or at a City facility to be used for promotional purposes; and, further that these will be the sole property of the City.
8. I understand that rates, fees, dates, times, classes, schedule of classes, and instructors established by the City may change at any time without notice.
9. I agree that City fliers and class schedules are not an expressed or implied contract.
10. I agree that the City is not responsible for any damage or loss that may arise from a misunderstanding, error, or omission.
11. I understand that the City reserves the right to change or cancel any or all of the participation/use rules at any time.
12. I understand that any individual behaving inappropriately or unsafely will be ejected and denied future participation.

I am signing a full release of any and all liability against the City of Chino and do so of my own free will.

Adult Participant/Parent or Guardian Signature

Date

Please continue to fill out the back of this form.

CONSENT TO TREATMENT OF MINOR

"In the event of sudden illness, accident or injury which may occur while said minor is engaged in an activity supervised by the Community Services Department/Recreation Division or their representatives, agents or assignees, when neither the parents, guardian or designated family physician can be connected. I hereby give my consent pursuant to California Civil Code #25.8 for emergency treatment as shall be necessary under the circumstances by any physician licensed under the Laws of the State of California."

FAMILY PHYSICIAN/GROUP: _____ PHONE # (_____) _____

ADDRESS: _____ CITY: _____ ZIP CODE: _____

INSURANCE COMPANY: _____ POLICY# _____

PERTINENT MEDICAL HISTORY INFORMATION (Epilepsy, asthma, diabetes, allergies, medications, etc.)

EMERGENCY NUMBERS (other than Parent/Guardian)

1. Name/Relation: _____ Phone# (_____) _____
2. Name/Relation: _____ Phone# (_____) _____
3. Out of Area - Name/Relation: _____ Phone# (_____) _____

Adult Participant/Parent or Guardian Signature

Date

◆ VOLUNTEERS ◆

The City of Chino Youth Sports Program is not possible without the support of numerous volunteer coaches, assistant coaches and scorekeepers. If you are interested in making a difference in the lives of our program participants, please check the appropriate box below and you will be contacted with more information. All City volunteers are required to pass a background which is provided at no cost to the applicant. Coaching volunteers must also attend the scheduled mandatory meetings at the beginning of every season.

Yes, I am interested in volunteering. Please contact me.