Marlboro County Parks & Recreation Department

Sports Registration Form



Ρ	Last Name	First Name	□	Male or 🗖 🛛 Female		
L	Birth date/ Ag	First Name e Grade Height	_ Weight School			
Α	Are you a returning player? 🗖	Yes 🗖 No If yes, what Team?	Division?			
Υ	Do you have a sibling playing in the same division? 🗖 Yes 🗖 No					
Ε	If Yes, Name Age					
R	*Same team privileges will apply only to siblings					
G	Address	City	, SC Zip Code			
E	Home Phone Number	Best time to reach	City, SC Zip Code Best time to reach you at home?			
N	Parent/Guardian Name	Work Phone	Cell Phone			
	Parent/Guardian Name		Cell Phone_			
E	EMAIL ADDRESS:					
R	Emergency Contact Person (Another person not mentioned above and over 18 years-old) Name					
Α	Telephone Number					
L	Relationship to participant					
l, t un cor lial An hc	derstand the nature of sports activities and a ndition to participate in such activity. I agree bility in connection with any injury to my chi d from any activities. I grant permission to r	d,, a minor, to p the minor's experience & capabilities and believe th to relieve the Marlboro County Parks & Recreation Id in connection with this league & assume all risk a managing personnel or other league representatives come ill or injured while participating g in activities r medical treatment.	e minor to be qualified, in good hea Department, its officer agents and Ind hazard incidental to such partici s to authorize and obtain any medic	Ith, and in proper physical employees from any pation, including transportation to al care from and licensed physician,		
Pa	Parent/Guardian Signature Date					
	hotography/Video Release: I hereby give permission to the Marlboro County Parks & Recreation Department to photograph and/or videotape my child.					
Th	The sole purpose of these photos and/or videos is for publication, advertisement, and exhibition of services.					
Pa	arent/Guardian Signature		Date			
		s, and supplies issued for said activity to the				
		play with any team to which league officials a				
aivi	sion unless there is a change in residen	cy. Parent/Guardian Signature		Date		

| (for office use only) |
|-----------------------|-----------------------|-----------------------|------------------------|
| RECEIPT NUMBER# | AMOUNT \$ | RECEIVED BY (Initial) | AGE VERIFIED (Initial) |
| | | | |

PLAYER-CODE OF CONDUCT

I hereby pledge to live up to my responsibilities as a Player Participating in the Department of Recreation & Parks Sports Program by following the Player's Code of Conduct.

1. I will play by the rules, and never argue or complain about the official's decisions.

2. I will be a role model of good sportsmanship and character. I will meet my responsibilities to the coach and the team.

3. I will play for the fun of it, and do my best to make sure that the game is fun for all participants.

4. I will demonstrate fair play and sportsmanship. I will treat participants, coaches, recreation administrators, and the public with respect, as I would like tc be treated.

5. I will refrain from the use of alcohol, drugs, or tobacco at all sports events.

6. I will make only positive and encouraging comments to players on both teams. I will be a good sport by cooperating with my coaches, teammates, opponents and officials.

7. I will remember that the goals of the game are to have fun, improve skills and feel good about playing. I will not take the game or myself too seriously. I will control my temper.

8. I will work equally hard for the team as for myself, and will always give my best effort.

9. I will remember that I am a league sports player, and that the game is for my enjoyment.

10. I will demonstrate good sportsmanship. I understand that the penalties for not adhering to this

Code of Conduct may range from a verbal warning to expulsion from the activity.

Player's Signature

Date

PARENT-CODE OF CONDUCT

I hereby pledge to live up to my responsibilities as a Parent participating in the Department of Recreation & Parks Sports Program by following the Parent's Code of Conduct.

1. I will place the emotional and physical well-being of the children above any personal desire to win. I will help my child understand the valuable lessons sports can teach.

2. I will be a role model of good sportsmanship and character. I will help my child meet his/her responsibilities to the coach and the team.

3. I will do my best to make sure that the game is fun for all participants.

4. I will lead by example in demonstrating fair play and sportsmanship to all participants. I will treat participants, coaches, recreation administrators, and tl public with respect.

5. I will help maintain a sports environment for all participants that are free of drugs, tobacco, and alcohol, and I will refrain from their use at all sports events.

6. I will make only positive and encouraging comments to players on both teams. I will not interfere or coach from the stands.

7. I will remember to not take the game or myself too seriously.

8. I will strive to create a positive recreational experience for everyone involved in the activity.

9. I will remember that I am a youth sports parent, and that the game is for the children and not the adults. Accordingly, I will encourage my child to play sports by providing a supportive atmosphere, but not pressure.

10. I will discuss the significance of this Code of Conduct with my

family members. I understand that the penalties for not adhering to this

Code of Conduct may range from a verbal warning to expulsion

from the activity.

Parent's Signature

Date

Marlboro County Parks & Recreation

PO Box 364, Bennettsville, S.C. 29512

843-479-5632 www.marlborocounty.sc.gov