

Fees Paid \$ \_\_\_\_\_

# 2020 MINI-FALL RECREATION PROGRAM SIGN-UP

## COOKING, PHOTOGRAPHY

**\*\*\* FEES ARE \$15.00 + SALES TAX (6.5%) PER CHILD, PER ACTIVITY \*\*\***

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Grade this Fall: \_\_\_\_\_

DOES YOUR CHILD HAVE ANY MEDICAL CONDITIONS THE INSTRUCTORS SHOULD KNOW ABOUT? IF SO, PLEASE EXPLAIN:

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### IN CASE OF AN EMERGENCY CALL

Name: \_\_\_\_\_ Number: \_\_\_\_\_

Name: \_\_\_\_\_ Number: \_\_\_\_\_

Name: \_\_\_\_\_ Number: \_\_\_\_\_

### IN CASE OF CANCELLATION CALL

Name: \_\_\_\_\_ Number: \_\_\_\_\_

Name: \_\_\_\_\_ Number: \_\_\_\_\_

Name: \_\_\_\_\_ Number: \_\_\_\_\_

### City Recreation Conduct Policy:

Each child will be given an equal opportunity to participate. The City program is a Recreation/Learning program, NOT purely a competitive program.

Remember the purpose of the program is for the participants to LEARN and have FUN.

Practice good sportsmanship, be a positive role model, and treat individuals as you would want to be treated.

If a recreation employee determines that the action of a parent, guardian, family member or participant is detrimental to the program, the said individual will be asked by the recreation employee to leave the playing area or facility. If detrimental actions continue during that incident or another incident occurs, the participant may be removed permanently from the program. Documentation will be kept by the employee and delivered to City Hall for delivery to the Recreation Board.

If a parent, family member, guardian, or participant has a specific concern about recreation program, he/she is requested to place their concern in writing with the specifics (date, time, and individual(s) involved) and deliver said concern to the Recreation Board by delivering the document to the City Hall. Said document must also include recommendation(s) of how the problem can be resolved.

### PARENT, FAMILY MEMBER, GUARDIAN:

Will not be allowed on the field, in the dugout, or on any recreation program venue unless specifically invited by the coach to provide assistance.

Will not threaten, make inappropriate remarks (including foul language or obscene gestures), or throw an object at a coach, umpire, spectator, recreation board member or participant at any time.

Will have reasonable and realistic expectations for the participant, not just a personal desire to win.

Will never inappropriately touch a coach, umpire, other parent or youth participant.

Will not attend games or events under the influence of alcohol or drugs, nor bring said items to a recreation program activity.

Will learn and understand the rules of the activity.

Will be responsible for transporting or arranging rides for their children to and from recreation activities and games.

Will promote and support the policies and purposes of the recreation program.

### PARTICIPANT:

Will attend ALL practices prior to a game (unless excused by the recreation employee) if expecting to participate in the game. (The instructor will keep attendance).

Will try his/her best at all times, including practices and games.

Will not speak or act disrespectfully (or use foul language or obscene gestures) to a coach, recreation employee, umpire, family member, spectator, or fellow team member or members of the opposing team.

Will display good sportsmanship at all time and use equipment properly.

Will wear a seatbelt when being transported to an event.

Will not be allowed to participate in a program until all registration forms (sign-up form, medical release, conduct policies, etc.) have been completed and signed by the parent or guardian.

THE UNDERSIGNED GUARDIAN/PARTICIPANT WARRANTS THAT HE/SHE HAS READ, UNDERSTANDS AND AGREES TO ALL CONDITIONS OF THIS REGISTRATIIONN AGREEMENT. By signing below I certify that as my child's parent and/or legal guardian, I will comply and my child will comply with the Hot Springs Recreation Program Conduct Policy. ADDITIONALLY, I am aware that by signing this document, I am waiving certain legal rights that I may have against the City of Hot Springs and I fully agree to do so.

**Parent's or Legal Guardian's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**COOKING\***

Age: 10-12 YEARS  
Dates: September 18 & 25  
Time: 11-12:30 PM  
Location: Evans Plunge  
**\*\*Supplies provided.\*\***

**PHOTOGRAPHY\***

Age: 14 and Up  
Dates: September 14, 16 & 21  
Time: 4:30-6 PM  
Location: Mueller Center Annex  
**\*\*Must provide own dlsr camera w/memory card or phone.\*\***

\*Masks & hand sanitizer provided.