

# NLR PARKS & RECREATION RECREATION PROGRAMS



## Registration/Application Form

Please complete this application for NLRPR recreational programs.  
(Additional Registration options available on other side if needed)

### Participant Information

*Please Print*

Participant's Name \_\_\_\_\_

CC Membership:  Yes  No

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

City: \_\_\_\_\_

Zip: \_\_\_\_\_

Home phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Day phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

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

Is Participant under age 18? Yes / No

If Yes:

Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_

2011-2012 School Grade: \_\_\_\_\_

Parent's/Guardian's Name:

\_\_\_\_\_

Work-Phone:

(\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ x \_\_\_\_\_

Cell-Phone:

(\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

### Program Information

*Please Print*

**Community Center** (check one):

- Glenview CC
- North Heights CC
- North Little Rock CC
- Sherman Park CC
- Other \_\_\_\_\_

**Program/Class**

Youth Basketball

Cheerleader

**Session**

**Cost**

30.00

30.00

**Total Payment Due:**

**ASSUMPTION OF RISK RELEASE OF LIABILITY**

It is understood that the North Little Rock Parks and Recreation Department (NLRPR) does not provide medical insurance covering injuries of any nature incurred during recreational programs at NLRPR facilities or during the transportation of participants to and from activities or special events. The undersigned hereby releases the NLRPR, its successors, assigned officers, agents and employees from any and all claims, demands and causes of action whatsoever in any way growing or resulting from participation in the program. All participants should be covered by their own insurance.

**Participant's or Parent's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*If participant is under 18 years old, parental signature is required.*

**WAIVER RELEASE FORM**

I hereby authorize the staff of the NLRPR to act for me according to their best judgment in any emergency requiring medical attention involving my child. I waive and release said director, staff members and the City of NLR from any and all liability for all injuries and illnesses incurred while in the program.

**Participant's or Parent's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*If participant is under 18 years old, parental signature is required.*

**PHOTO WAIVER RELEASE FORM**

I hereby grant NLRPR specific permission to reproduce, publish, circulate, copyright or otherwise use any and all photographs and/or videotape of me and/or my family, taken during the program, for use by NLRPR.

**Participant's or Parent's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*If participant is under 18 years old, parental signature is required.*

### For Office Use Only

Date Rec'd: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_ Cash / Check # \_\_\_\_\_ Receipt # \_\_\_\_\_



NLR PARKS & RECREATION  
**REGISTRATION ADDENDUM**

**BASKETBALL/CHEERLEADER  
Youth League  
Winter 2012**

Please complete this addendum for the listed NLRPR recreational program.  
(A standard Program Registration/Application must accompany this addendum.)

**Participant Information**

*Please Print*

Participant's Name \_\_\_\_\_

Division (circle one):

Boys      Girls

CC Membership: Yes No

**Program Specific Information**

Have you participated in *Basketball / Cheerleading - Tiny Tots* before?

No      Yes -      What years/seasons? \_\_\_\_\_

Who was your coach/instructor? \_\_\_\_\_

What was your team's name? \_\_\_\_\_

What were your team's colors? \_\_\_\_\_

**Volunteer Opportunities**

In an effort to keep this program at a minimal cost, we use volunteers to assist us in running this program. Please mark the areas with which you are willing to assist us:

- Coach
- Assistant Coach
- Team Parent

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

Phone: \_\_\_\_\_

**For Office Use Only**

Date Rec'd: \_\_\_\_\_ Standard Registration Form Rec'd: Yes / No