

State ID	Gm 1	Gm 4	Gm 7
Pre 1	Gm 2	Gm 5	Gm 8
Pre 2	Gm 3	Gm 6	Play-off



www.stpetetascoteens.org

Player Registration

Program you are participating in: (Check one in each category)

Sport Flag Football Basketball Dodgeball Volleyball

League Jr. Sr. **Division** Male Female Co-Ed

First Name _____ Middle Initial _____ Last Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

School _____ Grade _____ Age _____

Birth date _____ Female Male

Parent/Guardian _____ Cell Phone _____

EMERGENCY INFORMATION

Emergency Contact Name _____ Phone _____

LIABILITY WAIVER

As a participant of a TASCOCO teen program. I agree to adhere to the rules and understand they are in my best interest of safety. As a young adult, I am aware smoking, fighting, disrespect and roughhousing are not in my best interests and I agree not to participate in such activities.

The minor and the parent and/or guardian hereby acknowledge the above named minor may not attend this program unless the minor and the parent and/or guardian agree to sign the City of St. Petersburg's Release, Waiver of Claims, Hold Harmless and Indemnity Agreement, and upon its execution, such document shall be incorporated with and shall become part of this registration application. Inability of the participant to conform to the established rules and regulations will result in the notification of the infraction to the parent/guardian. The Parks and Recreation Department reserves the right to dismiss any participant for just cause. I give my consent to any emergency facility and physician to administer the necessary treatment to the teen named of this application in the event of an emergency at which time I cannot be reached. I give consent to transport by ambulance the above named teen if circumstances warrant it.

If under 18 this permission slip MUST BE SIGNED BY A PARENT OR LEGAL GUARDIAN.

Signature Of Parent _____ Date _____

Signature of Participant _____ Date _____