



CITY OF LOS ANGELES DEPARTMENT OF RECREATION AND PARKS



Good Sportsmanship is Everyone's Responsibility ... Be a Good Sport



Please Check Uniform Size: Youth Small Youth Med Youth Lg. Small Med Large XLg. 2XLg. 3XLg.

SEASON: Fall Winter Spring Summer

DIV: Little Dribblers (Yr. '20-'19) Mighty Mites (Yr. '18-'17) Rookies (Yr. '16-'15) Minors (Yr. '14-'13) Majors (Yr. '12-'11) Juniors (Yr. '10-'08)

SPORT: Basketball GPLA Basketball Flag Football GPLA Volleyball Soccer

TYPE: League Clinic

PLEASE PRINT CLEARLY AS THIS NAME WILL APPEAR ON CHILD'S AWARD:

Last Name: _____ First Name: _____ Suffix: _____ Gender (check): M or F

Birth Date: ____/____/____ Age: _____ Grade: _____ School: _____

Are you a returning player? Yes No If yes, Team: _____ Division: _____

Do you have a brother or sister playing in this same age division? Yes No

If yes Name: _____ Age: _____

*****Same team privileges will only apply to siblings ONLY*****

G Address: _____ Apt. #: _____ City: _____ Zip Code: _____

E Parent/Guardian: _____ Home Phone: _____

N Work: _____ Ext: _____ Cell: _____ Email: _____

R Emergency Contact Name: _____ Relationship: _____

A Home: _____ Work: _____ Ext: _____ Cell: _____

L Emergency Contact Name: _____ Relationship: _____

Home: _____ Work: _____ Ext: _____ Cell: _____

Please check if you are interested in the following: Coach Assistant Coach Volunteer

How did you hear about us? Mail Newspaper Friend/Relative School Phone Inquiry Other:

PARENT CONSENT FORM

I, the undersigned, give permission for my child, whose name appears above, to attend and participate in the **Pan Pacific Recreation Center's youth athletic program**. I understand my child may be transportation to and from the event and that the nature of this event is a sports activity. I know my minor's experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity. I agree to relieve the City of Los Angeles Department of Recreation and Parks, its officer agents, employees, and fingerprinted volunteer staff from any liability in connection with any injury to my child in connection with this activity. I understand that the City and Recreation Facility CARRIES NO INSURANCE. I understand that the City of Los Angeles Department of Recreation and Parks reserve the right to dismiss a child for any conduct detrimental to the program.

Right of Publicity: I authorize the City of Los Angeles Department of Recreation and Parks and to make, procure, or use photographs, film, tapes or other likenesses or Minor's physical image and/or voice as may be needed for use with the programs publicity material in perpetuity without compensation.

I, the undersigned parent of, _____ a minor, do hereby authorize the City of Los Angeles, Department of Recreation and Parks as agents for the under-signed to consent to X-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or specialized supervision of any physician licensed under the provisions of the Medical Practice Act on the staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or a said hospital. It is understood that this authorization is given in advance of any such diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable. This authorization shall remain effective for the duration of the program, unless revoked sooner in writing and delivered to said agent.

Signature _____ Date _____

PARENTS'/GUARDIANS' OATH TO KIDS

I promise to demonstrate good sportsmanship by being a positive role model and encouraging you to play and have fun while supporting you and your team in both victory and defeat.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

FOR OFFICE USE ONLY:	HOUSEHOLD ID	RR NUMBER	AMOUNT	AGE VERIFIED (Circle)	RECEIVED BY (Staff Initial)
				YES NO	

***REFUND POLICY:** No refunds will be issued after the Draft date. Any refunds give between time of Registration and Draft will be subject to a 15% administration fee.

INITIALS of Parent/Guardian _____

***TROPHIES/MEDALS/PICTURES:** Must be picked up within one month after completion of the league.

INITIALS of Parent/Guardian _____

***SPECIAL REQUESTS:** Will not be guaranteed. Same team privileges only apply to siblings. The goal of Pan Pacific Recreation Center Sports Program is to provide a balanced and competitive league.

INITIALS of Parent/Guardian _____

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BE A GOOD SPORT

PARENT'S CODE OF CONDUCT

I hereby Pledge to live up to my responsibilities as a Parent of a child 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 the public, with respect.
5. I will help maintain a sports environment for all participants that is free of all drugs, tobacco, and alcohol, and I will refrain from their use at all youth 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 adults. Accordingly I will encourage my child to play sports by providing a sportive 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/ Guardian Signature

Facility

Date

I Will Demonstrate Good Sportsmanship

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PLAYER'S 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 officials 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 to be treated.
5. I will refrain from the use of alcohol, drugs, or tobacco at all youth 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 youth sports player, and that the game is for my enjoyment and my skill improvement.
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 Signature

Facility

Date

I Will Demonstrate Good Sportsmanship

Be a Good Sport

