



# REGISTRATION FORM

Adult Sport Programs 2025

Full Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

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

### Adult Sport Season

Season: Winter Spring Fall

Sport/League: \_\_\_\_\_

#### 3v3 Basketball Leagues

*Wednesday A/B*

*Wednesday C*

Winter/Spring: \$135 (R) | \$142 (NR)

Fall: \$140 (R) | \$147 (NR)

#### 5v5 Basketball Leagues

*Monday League*

*Thursday League (Fall Only)*

Winter/Spring: \$550 (R) | \$578 (NR)

Fall: \$560 (R) | \$588 (NR)

#### Volleyball Leagues

*Tuesday Women's 6s BB*

*Tuesday Women's 6s B*

*Wednesday Reverse Co-Ed Quads*

*Thursday Women's Quads*

*Thursday Co-Ed 6s*

Winter/Spring: \$295 (R) | \$310 (NR)

Fall: \$295 (R) | \$310 (NR)

#### Softball League

*Friday Co-Ed Rec D*

Winter/Spring: \$515 (R) | \$545 (NR)

Fall: \$515 (R) | \$545 (NR)

**Payment:** Payment Type: Cash Check Credit/Debit Total Amount Paid: \_\_\_\_\_

Check # (made to CRPD): \_\_\_\_\_ Cash Amount: \_\_\_\_\_

Credit/Debit Card: Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_ CVV: \_\_\_\_\_

Receipt #: \_\_\_\_\_

**Carmichael Recreation & Park District**  
*Adult Sport Programs: January 1, 2025 – December 31, 2025*

**AGREEMENT, WAIVER, AND RELEASE**

In consideration for being permitted by the District to participate in the above-referenced activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the District (including its officers, employees, volunteers, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of active or passive negligence or carelessness on the part of the persons or entities mentioned above. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs, administrators, executors, and assigns and that I *shall* indemnify and hold the District (including its officers, employees, volunteers, and agents) free and harmless from any loss, liability, damage, cost, or expense which may arise out of or connected in any way with my participation in said activity. Additionally, I fully understand that my participation in the above-referenced activity exposes me to the risk of personal injury, death, communicable diseases, illnesses, viruses, and/or property damage. I hereby acknowledge that I am voluntarily participating in this activity and agree to assume any such risks.

**PHOTO AND LIABILITY RELEASE**

By signing this agreement, you are agreeing to release photo rights, including waiving any right of compensation, to Carmichael Recreation & Park District (CRPD). CRPD reserves the right to photograph facilities, activities, and program participants for potential future use, which may include sharing the photos with the Carmichael Recreation and Park District Foundation dba Carmichael Parks Foundation to use the photos to inform and promote the CRPD. **You further hereby release CRPD and Carmichael Parks Foundation from and against any injury or damage arising out of or related to the aforementioned activities.** All photos will remain the property of Carmichael Recreation & Park District.

**PARENTAL/GUARDIAN CONSENT:(To be completed and signed by parent/guardian if Participant is under 18 years of age.)**

I hereby consent that my child, \_\_\_\_\_, participate in the above-referenced activity, and I hereby execute the above Agreement, Waiver, and Release on their behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the District (including its officers, employees, volunteers, and agents) free and harmless from any loss, liability, damage, cost, or expense which may arise out of or connected in any way with said minor's participation in said activity.

**I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT AND I SIGN IT OF MY FREE WILL.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Printed)