

J.L. Sorenson Recreation Center

Herriman

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Herriman, Riverton, Bluffdale & South Jordan Communities

For Girls and Boys Ages 6-18

Location

Herriman High

School Track

11917 South 6000 West

Fee

\$55.00 Per Participant

Registration Deadline is

May 24, 2017

Late fee of \$5.00 will be charged beginning May 22nd

When

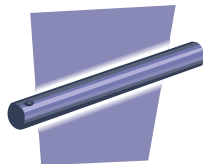
Mon/Wed/Fri or Tue/Thurs/Fri beginning May 30, 2017

Birth year 2007-2011: 4:30 p.m.—5:30 p.m.

Birth year 2005 & older: 5:30 p.m.—6:30 p.m.



For inclusion opportunities for people with disabilities, contact Ashley at 385-468-1520 or ahaddow@slco.org.



Program will be coached under the direction of current and past athletes and coaches of local high schools

Parent/Athlete Orientation

Birth year 2007-2011 Age Groups

Monday, May 22 at 6:00pm

Birth year 2005 and Older Age Groups

Monday, May 22 at 7:00pm

J.L. Sorenson Recreation Center

5350 West Herriman Main Street

If you have children in both groups, you only need to attend one meeting.



For more information please e-mail Mindy Mbitner@slco.org

*New Classifications	Birth Year
White	2010-2011
Red	2007-2009
Yellow	2005-2006
Green	2003-2004
Blue	1999-2002

Participants are grouped by birth year, not age

Participants will receive a t-shirt, and will participate in track and field meets.

Questions? Call:
385-468-1340

Registration Deadline is May 24, 2017
Late fee of \$5.00 will be charged beginning May 25
Register at the J.L. Sorenson Recreation Center
5350 West Herriman Main Street
or online at www.activityreg.com

Herriman Track and Field 2017 Registration Form

Circle according to birth year:

2010-2011

2007-2009

2005-2006

2003-2004

1999-2002

Circle session choice: **Session A—Monday, Wednesday, Friday**

Session B—Tuesday, Thursday, Friday

Circle shirt size: Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large Adult XL

Name of Participant _____ Boy ____ Girl ____ Grade ____ Birth Date _____ Age ____
(Last Name) (First Name)

Email (this is how we distribute important information throughout the season): _____
Address _____ City _____ Zip _____ School _____

Name of Parent or Guardian _____ Home Phone: _____ Work: _____

In an emergency please notify (Other than Parent or Guardian) _____ Phone: _____

Youth Sports Registration Statement



Check here to be contacted about inclusion opportunities for people with disabilities.

Parental Statement of Agreement – Assumption of Risk, Liability Release and Refund Policy

Assumption of Risk: I hereby acknowledge and agree that my child's participation in recreational activities involves inherent foreseeable and unforeseeable risks and hazards which may expose my child, or me, to illness, injury, or death. In consideration of my child's participation in such activities, I for myself, my child, my heirs, my executors and administrators, freely and voluntarily agree to assume and accept any and all risks to my child or myself associated with my child's participation in Salt Lake County recreational activities.

Release: In consideration of my child's participation in the Salt Lake County recreational activities, I, for myself, my child, my heirs, my executors and administrators hereby release Salt Lake County and its officers, agents, and employees from any cause of action, claim, or demand of any nature whatsoever I or my child may now have, or have in the future, against Salt Lake County on account of personal injury, property damage, death, or accident of any kind, caused by, arising out of, or in any way related to my child's participation in Salt Lake County recreational activities.

Indemnification: In consideration of my child's participation in the Salt Lake County recreational activities, I agree to indemnify and hold harmless County, its officers, agents, and employees from any and all causes of action, claims, demands, losses, or costs of any nature whatever cause by, arising out of, or in any way related to my child's participation in the Salt Lake County recreational activities. I agree that my duty to defend and indemnify the County under this Agreement includes all attorney fees, litigation and court costs, expert witness fees, and any sums expended by or assessed against the County for the defense of any claim or to satisfy any settlement, arbitration award, or verdict paid or incurred on behalf of the County arising out of or in any way related to my child's participation in the Salt Lake County recreational activities.

Refund: Refunds may only be requested in person and must be accompanied by a written request. As per Salt Lake County policy and procedures the Parks and Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. No refunds shall be given after the first day of the program.

Collections: I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred for collection. I understand that any account delinquent 30 days or more will be turned over to collection.

Emergency Treatment: I hereby authorize Salt Lake Parks and Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise therefrom.

Equal Opportunity: Salt Lake County Parks and Recreation provides equal opportunity to participate regardless of race, color national origin, sex, pregnancy, sexual orientation, gender identity, marital status, religion, age, genetic information, military or veteran status, and will upon request, provide reasonable accommodations to individuals with disabilities.

Name Posting: Unless otherwise indicated below, Salt Lake County is authorized to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website.

I do not authorize Salt Lake County to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website.

By signing this assumption of risk, liability release, and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosure, and that I agree to its terms. If any portion of this Agreement is held to be invalid by a court of law, then it is agreed and intended that all the remainder shall, notwithstanding, continue in full force and effect.

Name of Child Participant: _____

Signature (Parent or Legal Guardian): _____ Date _____

OFFICE USE ONLY.....Till #:	Amt.:	Date:	By:
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