



# 2017 Fall Girls Softball



## Recreational Girls League for ages 10 & Under

**What:** 2 Clinics, 6 games, uniform and 2 tickets to a Jazz game

**Where:** @ Holladay-Lions - 1661 E. Murray-Holladay Rd. (4750 S.)

**When:** 10U—Wednesdays and Saturdays

**Games Begin the week of September 11th**



**Fee:** **\$48.00** / \$33 rate if you qualify for free or reduced lunch  
(For Reduced/Free Lunch discounted fee you must register in person and be able to verification of eligibility at time of registration)

### Registration

Holladay-Lions

Recreation Center

1661 East Murray-Holladay Rd. (4750 S.)

- or - [www.activityreg.com](http://www.activityreg.com)

**\*\*\*Registration Deadline is September 4th\*\*\***

There will be a \$5 late fee after the registration deadline and space is limited

Call 385-468-1700 for more information  
or visit [www.slco.org/holladay-lions](http://www.slco.org/holladay-lions)

Canyons School District is not affiliated with this group and it should not be considered as being endorsed by the District or Canyons Education Foundation.



For inclusion opportunities for people with disabilities, contact Ashley at 385-468-1520 or [abowen@slco.org](mailto:abowen@slco.org).

# Registration Form

**10 & Under—Wednesday evenings and Saturday mornings**

**Play at Holladay-Lions, 1161 East. Murray Holladay Rd. (4750 South)**

Name of Participant \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_ Girl  Boy

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School Attending \_\_\_\_\_ Grade \_\_\_\_\_

Parent or Guardian \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

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

Emergency Contact (other than guardian) \_\_\_\_\_ Phone \_\_\_\_\_

Friends to play with (3 or more and you need to provide a coach) \_\_\_\_\_

Are there any injuries or conditions that our staff should be aware of?

***If 3 or more children request to be on the same team, a coach MUST be provided!***

**I WOULD LIKE TO BE A VOLUNTEER COACH—Please volunteer, we need your help!**

Coaches' Name: \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-Mail: \_\_\_\_\_

## PARENTAL STATEMENT OF AGREEMENT

### ASSUMPTION OF RISK, LIABILITY RELEASE, INDEMNIFICATION 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.

**with 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 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.

Signature of parent/guardian: \_\_\_\_\_ Date \_\_\_\_\_

OFFICE USE ONLY...Receipt No.

Amt.

By.

Date