

# TAYLORSVILLE RECREATION CENTER

# Cross Country Club

**Who:** Boys and Girls Ages 6-18

**When:** Season runs Sept 13 - Oct 15th.  
Practices will be held on Monday and Wednesday  
from 5:30-6:30pm

**Where:** Practices will be at:  
Valley Regional Park (4948 S 2700 W)  
& Oquirrh Park (4950 West Ed Mayne Ln - 5800 South)  
(See info sheet for specific dates/locations)

**Meets:** 3 meets held: Thur, Sept 28th; Tues, Oct 3rd & Sat, Oct 14th

**Orientation:** Wednesday, Sept 13th @ 6:00 pm (1st practice follows)  
Taylorsville Recreation Center (South side of building)  
Quick information session plus practice to follow

**Fee:** \$30 per participant - Includes team shirt, weekly practices,  
3 meets, and awards.

**\*\*Registration deadline is Sept 10th!\*\***



<u>Classifications</u>	<u>Birth Year</u>	<u>Age Range</u>	<u>Distance</u>
White	2010-2011	6-7	2km
Red	2007-2009	8-10	3km
Yellow	2005-2006	11-12	3km
Green	2003-2004	13-14	4km
Blue	1999-2002	15-18	5km



Questions? For more information or to register online visit [www.slco.org/taylorsville-rec](http://www.slco.org/taylorsville-rec)

Or contact Heather Woichik at [HWoichik@slco.org](mailto:HWoichik@slco.org)

**385-468-1732**



Find us on  
**Facebook**

Taylorsville Fitness &  
Recreation Center



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

**Please indicate T-Shirt size:**

Youth Small  Youth Medium  Youth Large  Adult Small  Adult Medium  Adult Large

**Classifications (birth year)**

- White Division 2010-2011
- Red Division 2007-2009
- Yellow Division 2005-2006
- Green Division 2003-2004
- Blue Division 1999-2002

Questions? Contact  
Heather at 385-468-1732  
or hwoichik@slco.org



**\*\*Registration Deadline:**  
**September 10th\*\***

Name of child \_\_\_\_\_  girl  boy

**PLEASE PRINT:** (first name) \_\_\_\_\_ (last name) \_\_\_\_\_

Best Phone Number: \_\_\_\_\_ (this number will be used to contact the player)

Email: (For important program updates) **PLEASE WRITE CLEARLY** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ zip \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_ Birthday \_\_\_\_\_ Born in \_\_\_\_\_

Parent or Guardian \_\_\_\_\_ Phone # (other than listed above): \_\_\_\_\_

In emergency notify (other than parent or guardian) \_\_\_\_\_



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.

**Media Consent:** I hear by grant permission to Salt Lake County to use my or my children's photograph, videotaped image, quotes/comments, or name for publicity and educational purposes in any and all publications and media without limit or compensation.

**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.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For Office Use Only: Amount: \_\_\_\_\_ Receipt #: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_