



BARTOW PARKS & RECREATION
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Adult Sport Registration Form

Participant's Name _____ Date of Birth: _____

Address _____ City _____ Zip Code _____

Primary Phone Number: _____ Secondary Phone: _____

E-mail Address: _____

Known Medical Conditions/Disabilities (allergies or other limitations): _____

Emergency Contact: _____ Phone: _____ Relation: _____

Division: Men's Women's Co-ed Team Name: _____ Team Manager: Yes No

WAIVER OF LIABILITY

In consideration of _____ being permitted to participate in the Program, I/We hereby acknowledge that we are fully aware of the potentially hazardous activities and conditions that I/We may be exposed to when participating in the Program that may result in injury and hereby assume the risk and full financial responsibility of all such injuries that such activities or conditions may cause, including, without limitation, the risk of injury during transportation to and from the Program, or from negligence, negligent supervision, equipment failure, sharp objects, naturally occurring conditions or phenomena, obstructions, hidden conditions, animals, hot/cold objects, trespassers, unlawful acts of others, faulty design, slipping, falling, and/or violent contact with other participants. I/We do hereby waive, release, absolve, and agree to hold harmless the organizers, sponsors, supervisors, participants, the City, and their employees from any and all liability, losses, damages or claims arising out of or resulting from injury or death to I/We during participation in the Program.

Signature: _____ Date: _____