



Novi Parks Registration Form

Last Name _____ First Name _____ Birthdate _____ M/F
Address _____ City _____ State _____ Zip _____

Phone: Home(____) _____ Work/Cell(____) _____

Email Address _____

I do not wish to receive email communication from Novi Parks New Address

Activity Code Number	Participant or Team Name	Sex	Birthdate	Grade 2012-2013	Program /Tickets or Division	Shirt Size YM-AXXXL (if applicable)	Price

Should we be aware of any special conditions (physical or otherwise)? _____

Youth Sports Information

Player Information

Any Allergies? _____

Player Practice Schedule-Choose one preferred practice night (not guaranteed) _____

Team Sponsorship-Sponsor a youth sports team for \$250 and your business name/logo will be placed on the team shirts.

Yes I'm interested, please contact me.

Coaching Information - We conduct background checks on all of our volunteer coaches

Please fill out information below if you are interested in being a volunteer youth sports coach

Head Coach Assistant Coach Name _____

E-mail Address _____

Phone _____

Choose one preferred practice night (not guaranteed) _____

Y N

- Have you ever coached this sport?
- Have you played in an organized league?
- Are you National Youth Sports Coaches Association Certified?
- Has your child played this sport before?

Waiver of Participation

Release, Waiver, and Assumption of Risk

(must be signed before participating in any event or activity). As a registered participant, or parent/legal guardian of a registered participant, in the listed activity or event, I am fully aware of and understand the potential risk involved with my, or my child's, participation in this physical activity, including, but not limited to, cuts, bruises, broken bones, and other injuries, damages, or losses. I hereby agree to assume all risk of injury, damage to persons or property, or death resulting from my, or my child's, participation in this activity or event and the use of City of Novi facilities. I do hereby fully release and discharge the City of Novi, its officers, agents, employees, volunteers, sponsors, and organizers from any and all liability for any injury, including death, damages, or loss that I, or my child, may have or incur as a participant in the listed activity or event, and further agree to indemnify and hold harmless the City of Novi, its officers, agents, employees, volunteers, sponsors, and organizers from and against any and all liability that may be suffered by me or my child as a result of, or in any way connected to, my or my child's participation in the listed activity or event. This Release, Waiver, and Assumption of Risk shall be binding upon my heirs and dependents.

Photo/Video Authorization

I hereby give my consent for Novi Parks to use photos/video coverage of myself and/or minor child participating in a Novi Parks sponsored program or event in future Recreation Guides, flyers, local cable channel programming, website, etc.

Special Needs

If anyone requires special accommodations to attend or participate in a Novi Parks program or activity, please call the office 248.347.0400 or email noviparks@cityofnovi.org least 48 hours prior to the event.

Signature _____ Date _____

Payment

Total Price \$ _____ Check Number (payable to Novi Parks) _____

Visa _____ Mastercard _____ Diners Club _____ Card Number _____ Exp _____

Signature _____ Print name _____

How to Register

Online registrations enjoy a \$5 discount at **cityofnovi.org**

Drop Off, Mail or Fax registration form to:
Novi Parks, Recreation & Cultural Services
45175 West Ten Mile, Novi MI 48375
Fax 248.347.3286