

# CITY OF PENSACOLA—YOUTH BASKETBALL AT VICKREY JANUARY - FEBRUARY 2022



CHILD'S NAME: \_\_\_\_\_ CITY RES (\$83): \_\_\_\_ NON RES (\$93): \_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ ZIP: \_\_\_\_\_

AGE: \_\_\_\_ DOB: MONTH \_\_\_\_ DAY \_\_\_\_ YEAR \_\_\_\_ MALE: \_\_\_\_ FEMALE: \_\_\_\_

*Eligibility Date: January 1, 2022*

SCHOOL: \_\_\_\_\_

UNIFORM SIZE: PLEASE CIRCLE ONE:    YS    YM    YL    AS    AM    AL    AXL

WOULD YOU BE INTERESTED IN COACHING?: \_\_\_\_\_

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## PARENT OR GUARDIAN #1

## PARENT OR GUARDIAN #2

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

PRIMARY PHONE #: \_\_\_\_\_

PRIMARY PHONE #: \_\_\_\_\_

SECONDARY PHONE #: \_\_\_\_\_

SECONDARY PHONE #: \_\_\_\_\_

EMAIL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

## PARENT OF GUARDIAN: PLEASE READ AND SIGN

I, as a parent or guardian and on behalf of my child, acknowledge that I am releasing the City of Pensacola, its agent and employees, from any and all liability, either individual, joint or several, which they may incur as a result of any act or acts of negligence, contributory negligence, or comparative negligence, engaged in by them which causes, either directly or indirectly, any injury, sickness or illness of any kind to my child. I further agree that I will hold the City of Pensacola, its agents and employees, harmless from any liability, payment of damages, costs and attorney's fees, and will indemnify the City, its agents and employees if the event that the payment of damages, costs and attorney's fees is incurred by the City arising out of or pertaining to in any way the negligence, contributory negligence of any employee or agent of the City of Pensacola, or of the City of Pensacola itself.

As a parent, I promise to: be involved in the supervision of my child, to behave in a non-abusive manner, to report others who are behaving abusively or inappropriately whether it is toward an official, coach, parent, spectator, or player.

Image Release: In consideration of my minor child/ward being allowed to participate in the City of Pensacola Youth Program, related events and activities, the undersigned agrees that such participant's likeness may be photographed or videotaped and that such images may be published in an outlet used to promote or publicize that program.

Refund Policy: For fee based program cancellations, a \$25 administrative fee will be assessed. Fees are non-refundable if the cancellation is made after the program registration has closed.

\_\_\_\_\_  
Printed Name of Parent or Guardian

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

## **Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19**

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19 is extremely contagious** and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

**City of Pensacola Parks and Recreation** has put in place preventative measures to reduce the spread of COVID-19; however, the City **cannot guarantee** that you or your child(ren) will not become infected with COVID-19. Further, **attending activities at City community centers (“the Center”)** could increase your risk and your child(ren)’s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending the Center and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Center may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Center employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)’s attendance at the Center or participation in Center programming (“Claims”). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless the **City of Pensacola**, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Center, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Center program.

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**Signature of Parent/Guardian**

**Date**

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**Printed Name of Parent/Guardian**

**Name of Participant(s)**