

Cottonwood Heights Recreation Center

YOUTH FLAG FOOTBALL

CO-ED LEAGUE: GRADES 1-6

SPRING 2017

CHRC's non-contact football program is great for learning the fundamentals of football with an emphasis on fun and fair play. This flag league is recommended for individuals who want a safer alternative to contact football, but is also a great start for kids who would someday like to play in full-contact leagues!

REGISTRATION:

Deadline for registration is March 26.

Bring in the completed form on the back to register in-person at CHRC or register online at www.activityreg.com

FEEES:

CHRC Members: \$45.00

CHRC Non-Members: \$50.00

(includes 8 games, organization/clinic day & an NFL flag jersey)

AGE DIVISIONS:

1/2 Grade

3/4 Grade

5/6 Grade

GAMES:

Games will be played twice a week; one game on Wednesday and one Saturday game.

Wednesday Games: 5pm or 6pm

Saturday Games: 8am or 9am

Game location: TBD

**Please note that game days listed above are subject to variation. Divisions may be combined or canceled depending on number of registrants.*

· WE NEED VOLUNTEER COACHES! ·

No experience necessary, just complete the "Parents" box on the back.

LEAGUE BEGINS APRIL 1, 2017



COTTONWOOD HEIGHTS
PARKS & RECREATION

(801) 943-3190

www.cottonwoodheights.com

PARENTS - *This program depends on volunteers for coaches!*

Yes, I am awesome and would love to be a head coach! *[Please provide info below]*

*Background Check
is required,
paid for by CHRC*

Name _____ Phone _____

Email Address (required) _____

Coaches MUST visit nflflag.com/form/coach and fill out the Coach Agreement prior to April 1, 2017. Any additional information for coaches will be provided to the email address above, as well as at the coach's meeting prior to league start date, April 1, 2017.

Coaches may be asked to assist in officiating duties and will be given the option to select their team name from current NFL teams.

Name of Parent or Guardian *(can leave blank if provided in box above)* _____

Parent/Guardian Home Phone _____ Mobile Phone _____

Email Address (required) _____

In Emergency, Notify *(if other than parent/guardian above)*

Name _____ Phone _____

Participant Information

Name of participant _____

Address _____

ZIP _____ City _____ State _____

Home Phone _____

Birth Date ____ / ____ / ____ Age ____ School _____

Spring School Grade 1/2 3/4 5/6

Participant would like to play with _____ **who attends** _____ **School**

*** Note that six or more players wanting to play together must sign up together at CHRC and have a head coach already in place.*

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 recreation 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 Cottonwood Heights Parks and Recreation Service Area (CHPRSA) recreational activities and programs.
- Release** - In consideration of my child's participation in the CHPRSA activities or programs, I, for myself, my child, my heirs, me executors and administrators hereby release CHPRSA, the Cottonwood Heights City (CHC) 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 CHPRSA or CHC 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 CHPRSA activities or programs.
- Indemnification** - In consideration of my child's participation in the CHPRSA activities or programs, I agree to indemnify and hold harmless CHPRSA and CHC, 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 child's participation in the CHPRSA activities or programs. I agree that my duty to defend and indemnify CHPRSA or CHC under this agreement includes all attorney fees, litigation and court costs, expert witness fees, and any sums expended by or assessed against CHPRSA or CHC for the defense of any claim or to satisfy any settlement, arbitration award, or verdict paid or incurred on behalf of CHPRSA or CHRC arising out of or in any way related to my child's participation in CHPRSA activities or programs.
- Refund** - Refunds may only be requested in-writing via email to warren@cottonwoodheights.com. No refunds shall be given after the start of the program. Full refunds will be provided in any case of league or division cancelation.
- Emergency Treatment** - I hereby authorize CHPRSA 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 hereby grant permission to CHPRSA 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, CHPRSA is authorized to post or publish the name of my child participating in CHPRSA activities and programs on the CHPRSA website. No, I **DO NOT** give permission to CHPRSA to post or publish the name of my child participating in CHPRSA activities or programs on the CHPRSA 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 or Legal Guardian _____ Date _____

Participation Fee - Participant is a member of Cottonwood Heights Recreation Center?

Yes (\$45)

No (\$50)