



PARTICIPANT REGISTRATION FORM

933 West Parish Rd. Sulphur, LA 70663 (337)527-2500 Fax (337)528-4934
Frasch Golf Course 400 Picard Rd. Sulphur, LA 70663 (337)527-2515

Junior Golf Program
Children & Youth 17 & Under
Annually

Other
Includes participants of all other
sports and/or activities not listed
above

**PLEASE SPECIFY OTHER
SPORT OR ACTIVITY BELOW**

THIS SECTION MUST BE COMPLETED IN FULL

Please check this box, if this is the first time this person is registering and/or participating in a Sulphur Parks & Recreation sports program or other activities conducted at SPAR facilities.

Today's date ____/____/____ Participant Email: _____

First Name: _____ MI: _____ Last Name: _____

Gender (M or F) _____ D.O.B ____/____/____ Age _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: (____) _____ - _____ Alt. Phone #: (____) _____ - _____

NOTES:

PARENT/GUARDIAN.

Parent/Guardian Name: _____

Phone #: (____) _____ - _____ Relationship to Participant _____

Email: _____

I do hereby certify that all information on this form is correct and that Sulphur Parks and Recreation (SPAR) and its paid and volunteer workers will not be held responsible for any injury to the participant while participating in any of the recreation program and/or activities at any SPAR facilities and/or during transportation to & from said facilities. Participants are responsible for arranging their own transportation to & from all activities and assume all liabilities related to said transportation. I further understand that SPAR does not provide health and liability insurance coverage for accidents or injuries that occur because of participation in or use of SPAR facilities. I fully understand that there are serious risks from participating in recreation and/or other physical activities. All persons participating in SPAR sponsored activities and/or using SPAR properties/facilities agree to conduct themselves according to SPAR standards for behavior and abide by all disciplinary actions imposed by SPAR. This release is valid for all SPAR sponsored programs and activities until revoked in writing.

The registering party verifies that the participant health and fitness is now and at all future time periods will be acceptable to participate in SPAR programs and/or activities. I understand SPAR requests that all participants consult their physician before becoming physically active.

SPAR may use text and email to provide information including, but not limited to, registration, draft dates, tryout dates, and upcoming events.

I hereby grant permission to Sulphur Parks & Recreation, Ward 4 District 2, to take and use: photographs and/or digital images of myself and/or child(ren) for use in news releases and/or materials as follows: printed publications or materials, electronic publications, or web sites. I authorize the use of these images without compensation to me. All negatives, prints, digital reproductions shall be the property of Sulphur Parks & Recreation Ward 4 District 2.

Signature _____ Date _____

Parent/Guardian's signature (if participant under 18 yrs.) or
Participant's signature (if 18 yrs. or older)