

**RECREATION CONTRACT AND AGREEMENT TO PARTICIPATE/RELEASE/WAIVER AND  
INDEMNITY FORM**

**Parents, please read before signing below:**

1. My son/daughter has permission to play for the team to which they are assigned.
2. Non-residents will be assessed an additional fee over the participant fee.
3. I am a participant, or the legal guardian of a minor participant, in this activity sponsored by Fowlerville Recreation (collectively, "participant"). I recognize and acknowledge that there are certain risks of physical injury including, but not limited to: cuts, bruises, broken or sprained limbs, paralysis or fatal injury. I agree that the participant will act in a reasonable and safe manner so as not to endanger the lives of persons or property of any other individual. I agree to assume the full risk of any injuries, property damage or loss, which the participant may sustain as a result in the participation of this activity. I will take full responsibility for and hold harmless Fowlerville Public Schools, and its employees and Fowlerville Recreation for any injuries that do occur to the participant. I further waive and release any and all legal rights that may accrue to the participant as a result and injury while participating in this activity. I will not pursue any legal remedies against Fowlerville Public Schools arising out of any incident, accident of damage to person or real property, or physical injury to any person, including the participant, arising out of participation in this activity. I certify that I am at least 18 years of age, and that the participant is qualified, in good health, and in proper physical condition to participate in able stated activity. In the event of an emergency, I authorize Fowlerville Public Schools to secure from any licensed hospital, physician and/or medical personnel any treatment deemed necessary for the participants immediate care and agree that I will be responsible for payment of any and all medical services rendered. I have read and understood the above and am signing freely the Agreement to Participate/Release/Waiver and Indemnity Form. Question can be directed to the Fowlerville Recreation Department at 517-223-6481. It is the policy of the Fowlerville Community Schools that no person on the basis of race, color, religion, national origin or ancestry, age, gender/sex, marital status, height, weight, disability or limited English proficiency shall be discriminated against, excluded for participation in, denied the benefit of, or otherwise subjected to discrimination in any program, activity, service or in employment. Inquiries or complaints related to discrimination should be directed to: The Assistant Superintendent of Schools –P.O. Box 769 Fowlerville, MI 48836 (517)223-6027
4. I (parent/guardian) promise to return all equipment and uniforms issued within the week child is finished playing for the season or will assume the cost of items issued.
5. Any falsification of the above information either intentional or unintentional will constitute automatic grounds for dismissal of that individual from the Fowlerville Recreation Program for the remainder of the current season and will automatically forfeit all registration fees.
6. **REFUND POLICY: A full refund will be made if (1) a program is canceled because of insufficient enrollment, or (2) a program fills before your registration is received. If a refund is made at your request, a \$15.00 processing fee will be withheld for basketball, Volleyball, soccer in – house, baseball, and softball, a \$45.00 processing fee will be withheld for cheerleading and travel soccer, a \$50.00 processing fee will be withheld for football and travel basketball and travel baseball, NO refunds will be issued for any camps or wrestling at any time. No refunds after the first week of practice for all other sports.**

I have read and fully understand all the above information.

\_\_\_\_\_  
Signature of parent/legal guardian

\_\_\_\_\_  
Date

The success of our non-profit organization is based upon parent involvement. Check the area that you would be willing to assist us with this season. Checking the yes area only means you are willing to assist in that area, it does not mean you will automatically be assigned or guaranteed that area.

**COACH:** YES\_\_\_ NO\_\_\_ **ASSIST COACH:** YES\_\_\_ NO\_\_\_ **Team Mom/Dad:** YES\_\_\_ NO\_\_\_  
(If you are selected as a head coach your money will be returned for your child's participation.)

Volunteer's Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_