

COED SAND VOLLEYBALL



Registration begins: May 22, 2018 **Registration deadline: June 7, 2018**
Resident Fee: \$15 **Non-Resident Fee: \$40**
 *Must be 17 years old by June 8, 2018 **COURSE# 6479**

League Signing up for	<input type="checkbox"/> Individual Player <input type="checkbox"/> On a Team/ Team Name: <input type="checkbox"/> Captain		
Participant's First Name		Last Name	
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth	/ /
Address			
City		Zip	
Primary Phone	<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell		
Secondary Phone	<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell		
Primary Email			

I would like the Apex Parks, Recreation and Cultural Resources to know the following information regarding this participant:

Medical conditions
 Allergies
 Special Needs

If you answered yes to any of these questions, please explain in detail:

Does the participant need an accommodation(s) to participate? **Yes** **No**

If yes, someone from inclusion services will follow-up with you regarding your request. The Apex Parks, Recreation and Cultural Resources welcome the participation of individuals of all abilities. In compliance with the ADA, we will provide reasonable accommodations to facilitate participation in our program. To ensure that reasonable accommodations are in place, accommodation requests should be received at least two weeks prior to the start date of the program. For more information, please contact Allie Prelaske at 919-249-3507.

Statement of Waiver

I, for myself or as parent or guardian, hereby assume all the risks and hazards incidental to the conduct of the activities. I release, absolve, and indemnify the Town of Apex, employees of the Town, volunteers, contractors and/or sponsors from all risks and hazards associated with the activities and in the event of injury, do expressly waive all claims against them. I understand that no insurance coverage is provided by the Town of Apex Parks, Recreation and Cultural Resources Department. I further give permission for proper emergency care to be rendered to myself or child should I not be available or able to give such permission.

As part of this approval, I acknowledge I may have the opportunity to review the premises, equipment and personnel qualifications to be used in conducting the activity. I also have the opportunity to discuss with program organizers potential hazards and risks that may be associated with the activity and take responsibility for doing so. Failure to exercise this option indicates my approval and acceptance. I understand the Town of Apex does not provide transportation to or from activities scheduled by the Apex Parks, Recreation and Cultural Resources Department. I grant my permission to allow my and / or my child's photo, as part of a group photo and without individual identifying information, to be used by the Apex Parks and Recreation Department for promoting programs operated or sponsored by the department.

Participant's Signature _____ **Date** / / **2018**

For Department Use Only

League Fee: **\$ 15 Residents** **\$ 40 Non-Residents**

Receipt # **DATE PAID:** / / **2018** **Staff Initials**