

# ATHLETIC PARTICIPATION FORM

## TOWN OF ZEBULON PARKS & RECREATION DEPARTMENT

Name of Participant \_\_\_\_\_ Shirt Size YS YM YL AS AM AL AXL

Sex:            Male            Female            (Please circle one)

Sport \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Mailing Address \_\_\_\_\_  
\_\_\_\_\_

Child's Home Phone \_\_\_\_\_

<b>Parent/Guardian Information:</b>		
Mother's Name _____	Cell Phone: _____	Email _____
Father's Name _____	Cell Phone: _____	Email _____
How would you rate your child's ability in the above sport? (Circle one)		
Beginner	Average	Above Average
<b>** Please include your email address (above) in order to be placed on our master list **</b>		

**\*\*\* VOLUNTEER/SPONSOR INFORMATION \*\*\***

Are you interested in serving as a volunteer head coach?	Yes	No
Are you interested in sponsoring a youth athletic team?	Yes	No
Did this child play this athletic event last year?	Yes	No

**LIABILITY WAIVER**

I hereby request that the above participant be accepted for participation in the above athletic league. I agree to assume the responsibility for any accident or injury while the participant is engaged in the league and do hereby release and absolve the Town of Zebulon, Zebulon Parks and Recreation, The Zebulon Recreation Advisory Board and/or Wake County Schools, their volunteers, supervisors or sponsors from any or all claims from such accident or injury. I also agree to abide by all rules and regulations established by the Zebulon Parks and Recreation Department and the Zebulon Recreation Advisory Board. Pictures or video clips may be taken while participating in Town of Zebulon programs. I give my permission to the Town of Zebulon to use such photos and videos in promotional, news, or informational media.

Parent/Guardian Signature: \_\_\_\_\_

**\*\*DO NOT RETURN THIS FORM TO YOUR SCHOOL\*\***  
Please mail or deliver form with appropriate fee to:  
Zebulon Parks and Recreation  
1003 North Arendell Avenue  
Zebulon, NC 27597