



Membership Application
(One application per child)

PLEASE USE INK AND PRINT CLEARLY

CHILD'S INFORMATION

Child's First Name(s): Child's Last Name

Address:

City State Zip

Child lives with: Both parents Mother Father Other:

Father/Guardian's First Name: Last Name:

Phone: (Cell /Message Phone) E-Mail:

Mother/Guardian's First Name: Last Name:

Phone: (Cell /Message Phone) E-Mail:

Emergency Contact (Other Than Parents or Guardian)

First Name: Last Name:

Phone E-Mail:

Child's Birthdate: Age: Sex: Male Female (Circle one)

School: Grade:

Names Of Siblings:

Please tell us what programs you are interested in:

The following information is NOT required, and will not affect in any way participation within the PAL program. Information will be used to compile data required by the U.S. Department of Housing and Urban Development (HUD) and other City, County, State and Federal agencies which request this information for informational purposes. This information will also assist PAL in applying for grants to fund programs.

Do you receive any public assistance? (SSI, Food Stamps, or other Aid) YES / NO (Circle one)

What language is your primary language at home?

What country was child born?

What country were parents born?

What is your ethnicity? (If more than one, write all that apply.)

## AGREEMENT OF INDEMNITY RELEASE OF LIABILITY AND ASSUMPTION OF RISK

As a condition of and in consideration of being permitted to enroll your child in the Rancho Cordova Police Activities League, sponsored programs, you are requested to read this form carefully and indicate your agreement by dating and signing the form below.

### ACKNOWLEDGEMENT OF RISK OF ACTIVITIES

*I acknowledge and realize and am aware that my child will be participating in a variety of activities. I understand that there are elements of risks in any activity associated with participation. These risks include, but are not limited to, falling, tripping, being hit by another child, getting injured in a vehicle which is providing transportation, etc.*

*I also acknowledge and understand that although Rancho Cordova PAL staff and volunteers may be present; those persons are not always able to prevent the possible injuries from risks that have been described above.*

Therefore, I agree as follows:

#### 1. Release

As a condition of and in consideration for being permitted by Rancho Cordova PAL to participate in the activities provided, I for myself and/or minor children for which I am a parent/legal guardian or otherwise responsible, any heirs, personal representatives, or assigns do hereby release, discharge, and covenant not to sue the Rancho Cordova PAL, its employees, principles, directors, officers, agents, volunteers, or anyone affiliated with the Rancho Cordova PAL and each/every landowner, municipal and/or governmental agency upon whose property an activity is conducted from all liability and waive any claim for damages arising fro any cause whatsoever, except that which is the result of gross negligence.

#### 2. Express Assumption of Risk and Responsibility

In recognition of the inherent risk of the activity which I and any minor children for which I am responsible, will engage in, I confirm that my child is physically and mentally capable of participating in this activity and using the equipment. My child is participating willingly and voluntarily. I assume full responsibility for personal injury, accidents and/or illness, including, but not limited to, sprains, torn muscles, bites, wounds, scrapes, abrasions and/or contusions; head, neck and/or spinal injuries, bites or attacks by animals or insects, allergic reactions, shock, paralysis, coma or death, and any related expenses that are related to my child. I assume all responsibility for damage to or loss of my/our personal property as a result of any accident that may occur.

#### Hold Harmless/Assumption of Risk

I agree that I/we will indemnify and hold harmless the Rancho Cordova PAL, the City of Rancho Cordova and the County of Sacramento, and any affiliated organization, its representatives, its employees, principles, directors, officers, agents, volunteers, or anyone affiliated with the City of Rancho Cordova and the County of Sacramento and each and every landowner, municipal and/or governmental agency upon whose property and activity is conducted, from any loss, all liability and waive any claim for damages or costs arising for any cause whatsoever related to my child's participation, except that which is the result of gross negligence.

I further expressly agree that this assumption of risk, release and indemnity agreement is intended to as broad and inclusive as is permitted by the laws of the State of California and if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I also agree to take any, all and full responsibility for any interactions that occur relating to an employee of the City/County who is in any fashion associated with or having contact with my child outside the specific hours of the program.

**I HAVE READ THE FOREGOING ACKNOWLEDGEMENT OF RISK, ASSUMPTION OF RISK AND RESPONSIBILITY, RELEASE OF LIABILITY AND HOLD HARMLESS AGREEMENT. I UNDERSTAND THAT BY SIGNING THIS DOCUMENT, I AM WAIVING VALUABLE LEGAL RIGHTS. I DO SO VOLUNTARILY. I DO SO WITH FULL UNDERSTANDING THAT THE RANCO CORDOVA PAL, THE CITY OF RANCHO CORDOVA AND THE COUNTY OF SACRAMENTO ARE NOT TO BE HELD RESPONSIBLE, WHATSOEVER, OR AT ALL FOR INJURIES THAT MAY OCCUR TO ME AND/OR ANY CHILD OF MINE EXCEPT THAT WHICH IS CONCLUSIVELY DETERMINED TO BE THE RESULT OF GROSS NEGLIGENCE.**

**BY SIGNING THIS AS A PARENT OR GUARDIAN, I HEREBY AGREE THAT I AM DULY AUTHORIZED TO DO SO ON BEHALF OF MYSELF AND ON BEHALF OF ANY OTHER PARENT OR GUARDIAN TO THE PARTICIPATING CHILD.**

DATED: \_\_\_\_\_

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature of Parent or Guardian of Minor Child

**MEDICAL RELEASE**

**Medical / Insurance Information**

Do you have INSURANCE?                      \_\_\_\_\_ YES    \_\_\_\_\_ No

Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_

Physician's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Preferred Hospital or Clinic \_\_\_\_\_

Allergies for drugs or foods: \_\_\_\_\_

Important medical information, special medications, or special instructions we should be aware of: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List any restrictions to medical treatment: \_\_\_\_\_

\_\_\_\_\_

**MEDICAL RELEASE: AUTHORIZATION CONSENTING TO TREATMENT OF MINOR**

I/We, the undersigned, parent(s) or legal guardians of \_\_\_\_\_, a minor, do hereby authorize the staff of the Rancho Cordova Police Activities League, or an authorized representative, as agent(s) for the undersigned, to consent to any X-Ray examination, anesthetic, medical or surgical diagnosis, treatment and hospital care which is rendered under the general or specific supervision of any physician and surgeon licensed under the provisions of the California Medicine Practice Act on the medical staff of a licensed hospital, whether such examination, diagnosis, or treatment is rendered at the office of said physician or at such hospital.

It is understood that this authorization is given in advance of any specific examination, diagnosis, treatment, or hospital care being required, and is given to provide authority and power on the part of our above named agent(s) to give specific consent to any and all such examinations, diagnosis, treatment, or hospital care which the aforementioned physician in the exercise of his best judgment may seem advisable.

Father \_\_\_\_\_ Date \_\_\_\_\_  
or  
Mother \_\_\_\_\_ Date \_\_\_\_\_  
or  
Guardian \_\_\_\_\_ Date \_\_\_\_\_

**PHOTO RELEASE**

I grant to Rancho Cordova Police Activities League, its representatives and employees the right to take photographs of me and my property in connection with the above-identified subject. I authorize the Rancho Cordova PAL, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that the Rancho Cordova PAL may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Signature \_\_\_\_\_

Printed name \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_

Signature, parent or guardian \_\_\_\_\_  
(if under age 18)

## MEMBERSHIP AGREEMENT

### TO PARENTS/GUARDIANS

**THE RANCHO CORODVA POLICE ACTIVITIES LEAGUE** is conducting programs which will provide positive and constructive athletic, recreational and educational activities for your son, daughter or ward. Each activity is designed to teach valuable life skills to its members. The **RANCHO CORDOVA POLICE ACTIVITIES LEAGUE** staff expects your child to act in a responsible and respectful way towards other youth and our officers, instructors, coaches and volunteers. Therefore it is imperative that your child adheres to the safety policies we have set forth.

A positive attitude, respect for others and the environment are most important! The completion of this registration form gives the **Rancho Cordova Police Activities League** permission to provide athletic, recreational and education activities to the youth whose name appears below.

### TO THE PARTICIPANT (CHILD):

You are responsible for appropriate behavior during the time you are participating in the **Rancho Cordova Police Activities League**. In order to become a member of the **Rancho Cordova Police Activities League** you must agree to the following:

1. I will maintain a positive attitude at all times.
2. I will dress appropriately during all activities. (Shirts and shoes are required at all times.)
3. I will respect myself and others at all times. I will not say racist or prejudicial remarks.
4. **I will not use or have possession of any drugs, alcohol beverage, cigarettes, or weapons of any kind.**
5. I will not use profanity, will not act physically or verbally abusive or become violent with others.
6. I will RESPECT all equipment, supplies, and materials.
7. I will not play nor sing music which has offensive lyrics.
8. I will not leave the scheduled activity until I notify all staff members present and after receiving permission from staff member in charge.
9. I will be on time for all scheduled meetings, activities, and trips.
10. I will report any problems to the staff.
11. I will not sexually harass anyone of any kind and will report any incidents of harassment of any kind.
12. I will follow ALL safety instructions at all times.

Any violation of the aforementioned rules will result in corrective action being taken. We are looking forward to a positive experience. It is the responsibility of the Rancho Cordova Police Activities League staff to maintain a safe environment for our youth. Therefore we cannot allow the behavior of any individual to jeopardize the success and safety of our program. The corrective action protocol is as follows:

- **Oral reprimand**
- **Written reprimand**
- **Dismissal from our program**

**Depending on the severity of the violation, a participant may be expelled from the Rancho Cordova PAL program for any one single violation.**

I, \_\_\_\_\_ agree to be a responsible member of the Rancho Cordova Police Activities League. I will behave in a manner that promotes respect for others and their property. I have read and understand the rules for being a member. I further understand that my membership privileges may be revoked at any time as a result of violating the aforementioned rules.

\_\_\_\_\_  
Signature of Participant (Child)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date