

LUFKIN PARKS & RECREATION

SPORTS REGISTRATION please check next to the sport and circle the division

 YOUTH BASEBALL:

Prep(4) T-Ball(5-6) Farm(7-8) Minor(9-10) Major(11-12) Junior(13-14)

 YOUTH SOFTBALL:

6U - 8U - 10U - 12U - 14U

 YOUTH BASKETBALL:

CoEd 5-6 B7-8 B9-10 B11-12 B13-14 G7-8 G9-10 G11-12 G13-14

 YOUTH KICKBALL:

3-4 or 5-6

 GIRLS YOUTH VOLLEYBALL:

5-6 7-8 9-10 11-12 13-14

PLAYER REQUEST if check is made, fill-in appropriate information

 PLAY WITH SIBLING(S) list name(s): _____

 PLAY UP TO NEXT AGE DIVISION: _____

 SPECIAL REQUESTS _____

(Please write in specific request, requests are not guaranteed.)

 RETURNING PLAYER

PARENT OR GUARDIAN CONTACT INFORMATION

MOTHER *Interested in coaching? (yes or no)* Head Coach Assistant Coach
 Last Name First Name Work Phone Cell Phone

Email: _____

FATHER *Interested in coaching? (yes or no)* Head Coach Assistant Coach
 Last Name First Name Work Phone Cell Phone

Email: _____

(We respect your privacy at LPAR. On occasion, we send emails updating you about sports and recreation programs. By providing your email address, you agree to receive such emails from LPAR.)

Player Information	
Last Name	First Name
Address (No P.O. Box)	City
State	Male/Female Circle One
Zip	Date of Birth
Shirt Size Circle one:	Home & Cell Phone
YS	YS
YM	YM
YL	YL
AS	AS
AM	AM
AL	AL
AXL	AXL
6/8	6/8
10/12	10/12
14/16	14/16
34/36	34/36
38/40	38/40
42/44	42/44
46/48	46/48

Special Sponsorship by:  Academy®
SPORTS+OUTDOORS

LUFKIN PARKS & RECREATION LIABILITY WAIVER

Minor release:

I hereby acknowledge that I am the parent and/or guardian of the above named minor, and that the said minor has my permission to participate in above named activities and/or programs with the City of Lufkin, Parks & Recreation Department. I understand and agree in giving my permission that the City of Lufkin; its agents and employees, will not be liable or responsible for property damage or personal injuries of any kind or character which may occur during said programs or activities, and I do hereby release and forever discharge the said, City of Lufkin of and from all damages, personal injuries, claims, suits, demands, or causes of action arising out of or in connection with the said activities and/or programs.

I hereby represent and warrant the above is in good health and has no physical condition which represents a risk of participation in any program, sports, and facilities owned or used by the City of Lufkin, Parks & Recreation Department.

Photo release:

I understand photos and/or video may occasionally be taken of my child while participating in programs. These photos and videos are for department use only and may be used in future brochures, flyers, presentations, advertisements, or on the City's website.

THANK YOU FOR SUPPORTING LUFKIN PARKS & RECREATION!

Parent or guardian name: _____
(Please print)

Signature: _____ Date: _____



For office use only:

Receipt #: _____ CA CK CC Amount Paid: _____ Date: _____
