

# Raptor Sports School Inc.

## Registration, Parent Contact Information and Release of Liability Form

Athlete's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_, CA Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Athlete's Cell \_\_\_\_\_

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Mother's Cell \_\_\_\_\_ Father's Cell \_\_\_\_\_

E-mail (please print clearly) \_\_\_\_\_

Male \_\_\_ Female \_\_\_ Birthdate \_\_\_/\_\_\_/\_\_\_ Age as of August 1, 2018 \_\_\_

Emergency Contact \_\_\_\_\_ (other than parents)

Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Additional Phone \_\_\_\_\_

Physician's Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Health Insurance Co.: \_\_\_\_\_ Group # \_\_\_\_\_

Allergies and/or other medical conditions \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To comply with Federal Nondiscrimatory practices and reporting guidelines related to our 501 (c)(3) exemption as a school, please check to the box that best describes your athlete. This section is optional, if you do not feel comfortable answering, please choose "no answer".

\_\_\_\_\_ Hispanic \_\_\_\_\_ African American (Not Hispanic)

\_\_\_\_\_ American Indian/Alaska Native \_\_\_\_\_ White (Not Hispanic)

\_\_\_\_\_ Asian (Not Hispanic) \_\_\_\_\_ Two or more (Not Hispanic)

\_\_\_\_\_ Pacific Islander (Not Hispanic) \_\_\_\_\_ No Answer

\_\_\_\_\_ Filipino (Not Hispanic)

USA WP Member #: _____	Age Group: Boys ___ Girls ___
Fall ___ Winter ___ Spring ___ Summer ___	10U ___ 12U ___ 14U ___ 16U ___ 18U ___
Payment: Cash ___ Check # _____ Paypal ___ Amount \$ _____	

**RELEASE OF LIABILITY**

My child, \_\_\_\_\_, is a participant in the activities provided by the Raptor Sports School Inc. and has my permission to participate in all activities including but not limited to practices, scrimmages, games & tournaments. I certify that my child has full medical insurance. I also certify, to the best of my knowledge that my child is physically fit and able to participate in sporting events. I acknowledge that water polo and/or swimming is an extreme sport and can lead to minor or serious bodily injury. With full understanding of the potential risks, I hereby assume those risks of participation. In the event of an injury, I assume financial responsibility for the bills incurred. In the event of injury or sudden illness, I as legal guardian, hereby grant my permission for my child to be treated by a qualified and licensed physician in the event that immediate treatment is necessary, as determined by the attending physician. Permission for treatment is authorized in the event that I am unable to be reached following a reasonable effort to do so. I understand that it is my responsibility to inform the club administration when my contact and/or insurance information changes. I also agree to pay all fees associated with club activities: session registration fees, equipment fees, travel fees where applicable, etc. Further, I understand that Raptor Sports School Inc. is a separate entity and it is not associated with Chino Hills High School, Diamond Bar High School, Chino Valley Unified School District or Walnut Valley Unified School District. I certify that I have read and understand the release of liability. I understand that the release of liability applies to all activities or events sponsored by Raptor Sports School Inc. I understand that I have given up substantial rights.

I, \_\_\_\_\_, the undersigned parent or legal guardian of the athlete, \_\_\_\_\_, execute the foregoing release for and on behalf of the minor named herein. I hereby bind the minor, all other assignees and myself to the terms of this release. I represent that I have legal capacity and authority to act for and on behalf of the minor named herein. I agree to indemnify and hold harmless the persons or entities named in this waiver and release for any claims or liabilities assessed against them as a result of any insufficiency of my legal capacity or authority to act for and on behalf of the minor in the execution of this release.

I fully consent to my child's participation in events sponsored by Raptor Sports School Inc. This permission is granted for this period of time: August 28, 2017 to August 1, 2018.

Parent/Guardian's Printed Name \_\_\_\_\_

Parent/Guardian's Signature \_\_\_\_\_ Date Signed \_\_\_\_\_

THE RAPTOR SPORTS SCHOOL INCORPORATED  
NONDISCRIMINATORY POLICY, STATEMENT OF PARTICIPATION,  
BEHAVIORAL STANDARD AND PERMISSION OF PHOTOGRAPHIC USE

**Non Discrimination Policy**

The Raptor Sports School Incorporated does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations. These activities include, but are not limited to, hiring and firing of staff, admission of students, selection of volunteers and vendors, and provision of services. We are committed to providing an inclusive and welcoming environment for all members of our staff, clients, volunteers, subcontractors, students, vendors, and clients.

**Statement of High School/Club Player Participation**

Participation in Raptor Water Polo does not guarantee any student athlete a place on any High School Water polo Team, nor is attendance to Raptor Water Polo required by any known High School Water Polo Team to compete in their respective program.

**Behavioral Standard**

Raptor Sports expects its parents, coaches, and players to set the example for behavior and sportsmanship. Should a participant's behavior conflict with this expectation Raptor Sports reserves the right to discipline the offending party as necessary. Discipline could include suspension or expulsion from the program. Raptor Sports will not issue refunds for games or practices lost due to disciplinary infractions.

Please verify with your signature that you have read and understood our nondiscrimination policy, behavioral standards and statement of High School/Club Player participation.

Parent Name/Signature\_\_\_\_\_

Student Name /Signature\_\_\_\_\_

**IMAGE/INFORMATION PERMISSION FOR CLUB MEDIA (Please only initial ONE):**

\_\_\_\_\_ (Initial) I hereby grant to The Raptor Sports School Incorporated and its affiliates the right to use my child's image, name, and biographical information as they may desire, in all media and in all forms including, but not limited to, publications, any televised photography and recordings. Examples include, but are not limited to, the newspaper and other print news media, televised news media, promotional print media and website.

\_\_\_\_\_ (Initial) I do not grant The Raptor Sports School Incorporated the right to use the image or information of the student athlete specified above.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_