



Brevard County Parks & Recreation
Youth Programs Registration Packet



Please Print

Participant's First Name: _____ Last Name: _____

Age: _____ Date of Birth: _____ Grade Entering: _____ Gender: M F

Please choose a T-Shirt size for above named participant:

Youth – S M L **Adult** – S M L XL XXL

Is your child allowed to participate in the following activities?

Swimming – Yes No **Movies** – Yes No **Bike/Walk Permission** – Yes No

SPORTS PARENT PLEDGE – I pledge to promote positivity in youth sports and act as a role model to my child, as well as other participants and sports parents I meet. I will serve as an advocate for good sportsmanship and to keep fun and learning at the center of the youth sports experience. I will try to improve upon my youth sports knowledge so that I can be an informative leader in the youth community.

Address: _____ City: _____ State: _____ Zip code: _____

Parent/Guardian Name: _____ Cell Phone: _____ Home Phone: _____

Email: _____ Place of Employment: _____ Work Phone: _____

Alternate Emergency Contact: _____ Phone: _____

Alternate Emergency Contact: _____ Phone: _____

Alternate Emergency Contact: _____ Phone: _____

Parks and Recreation will not release participants to anyone not listed above.

Additional Forms Available:

Medication, Conditions and Restrictions (*Attachment A*)

Bike/Walk Permission (*Attachment B*)

Notice of Temporary Guardianship (*Attachment C*)

Discount Form (*Attachment D*)

Parent/Guardian Volunteer Application (*Attachment E*)

For Office Use Only: Location: _____

Summer Camp Winter Camp Spring Camp After School Program: _____

Athletics: Preschool Youth Teen Other: _____

Swim Lessons: Water Babies (6-36 months) Preschool (3-5 years) Youth (6-16 years) Swim Team



Brevard County Parks & Recreation Youth Programs Rules and Guidelines



REGISTRATION - All fees must be paid prior to participation. It is recommended that you pay for the weeks desired at time of registration in order to guarantee participant's enrollment. Please ensure accuracy of the information provided in the registration packet. Parent/Guardian is responsible to keep this information updated and to notify staff in writing of any changes. Checks should be made payable to the Brevard County Board of County Commissioners (BoCC). Please retain your receipt(s), if needed, for the IRS. Brevard County Tax ID # 59-6000523.

DISHONORED CHECKS - When a check is returned unpaid by the bank, the original amount of the check plus any bank service charges must be paid in full by cash, certified check or credit card. Participant(s) will not be allowed to attend the program until payment is made in full. Future registrations must be paid by cash, certified check, or credit card. Checks may not be re-deposited.

REFUNDS - An application for refund must be received prior to scheduled date of use, except for illness or family emergencies, in which case proof must be provided, and the application must be received within 7 days following absence. A processing fee of \$20.00 will be assessed for each refund application. Daily refunds are not available.

DISCIPLINE POLICY - Please review the rules with the participant(s). In the event a participant is involved in an incident requiring discipline, a discipline report will be sent home with the participant. The participant must return the discipline report signed by the parent/guardian before being allowed to further participate in the program. Each incident will be documented and a supervisor will be notified before the participant is suspended or removed from the program. The County reserves the right to immediately expel any participant from the program.

PHYSICAL CONTACT MADE 1st Incident: - Participant will be picked up the day of incident and will be suspended for the next day. 2nd Incident: - Suspension for one (1) week. 3rd Incident - Removal from program.

DISRESPECTFUL, DISRUPTIVE OR DESTRUCTIVE BEHAVIOR 1st Incident: - Removal from activity. 2nd Incident: - Participant will be picked up the day of incident and be suspended for the next day. 3rd Incident: - Suspension for one (1) week. 4th Incident: Removal from program.

Please note: If your child is suspended due to behavior issues, there will not be any refund of camp fees, field trips fees, or any other associated costs incurred for the camp.

PROGRAM RULES (Each program will develop rules as needed)

1. Swimming is a part of some programs. All children are swim tested by certified lifeguards. Non-swimmers are required to wear life jackets and must stay in shallow water. A wristband will be provided for identification of all non-swimmers. Swimming lessons are not part of camp. Lessons are available through a separate program. Please inquire.
2. Movies are part of some programs. Age-appropriate movies will be shown.
3. Bike/Walk participants may sign themselves in and out at the beginning and at the completion of the day. Participants will not be released before 4pm on their own without prior written authorization by the parent/guardian or others authorized on this registration form.
4. Participant must stay with assigned group unless reassigned by program staff. Participant must ask permission from staff to leave the group.
5. Participant will show courtesy to fellow participants and staff.
6. Each participant is expected to show respect for personal, private and county property.
7. Participant will be responsible for using games and equipment properly.
8. Name-calling, cursing, swearing, and fighting will not be tolerated.
9. Participant must comply with staff and observe rules at all times. Disrespect will not be tolerated.
10. Participant must keep hands, feet, and objects to themselves.
11. Participant must clean their area before moving to the next activity.

CHECK IN - Each participant must be escorted into the program and checked in by signing the daily sign in sheet. Please do not bring participants to the facility prior to start of program. - staff is not available to supervise participants before the scheduled program time. If the participant has bike/walk authorization, they are not permitted to check themselves in before the start of the program or out before the end of the program unless the parent/guardian provides written permission. All late arrivals must be signed in with staff. Brevard County will not be responsible for children who are not signed into the program.

CHECK OUT - Parks & Recreation will not release participant(s) to anyone not listed on the Registration Form. It is the responsibility of the Parent/Guardian to keep this information up to date. A legal document must be presented to identify any change in legal custody that affects who is or is not authorized to leave the site with the participant. At the time of pickup, proper picture identification and signature will be required. A Late pickup fee of \$20.00 per participant shall be assessed for participants not picked up within 15 minutes of the conclusion of the program. If the parent/guardian is late, a telephone call is appreciated, but does not relieve you of the responsibility of the late fee. Payment of this fee will be required before the participant will be allowed back in the program. If staff is not able to reach the parent/guardian, appropriate authorities will be notified.

CAMP FIELD TRIPS - Field trips are for weekly registered participants. All field trips are scheduled in advance and may be canceled at any time. Field trips must be paid in advance of the scheduled field trip. Program T-shirts must be worn on field trips. Additional information will be given the week of the field trip. Please send participants with a change of clothes on all water days. If a participant cannot attend the field trip, the parent/guardian will need to make arrangements in advance with the staff supervisor for the participant to stay at another program location for the day if possible. The parent/guardian will be responsible for transportation to and from the alternate location.

AQUATICS – Swim Team participants may NOT be registered in a USA Swimming year-round program.

ATHLETICS – Players will not be placed on certain teams unless the parent is coaching. No special recognition will be given for practice times, travel, coaches or friendships. Children under the age of 12 years are not to be left unattended.

CONDITIONS – Should the participant have any conditions or restrictions (to include medication) that we should be aware of, please inform Brevard County Parks and Recreation.

Having been informed of the activity to provide supervised recreation for youth, having read and been provided a copy of the Program Guidelines (page 2 and 3 of registration packet) I, the parent/guardian of the participant named, do hereby give my approval for participation in any and all of the activities as indicated including Media Release described below. I assume all risks and hazards incidental to the conduct of the activity, transportation to and from the activities, and I do hereby release, absolve, indemnify and hold harmless Brevard County, its agents and employees, the organizers and sponsors, any and all of them. In case of injury to the participant, I hereby waive all claims against the organizers, the sponsors or any of the supervisors appointed by them. I likewise release from responsibility any person transporting the participant to and from activities.

I further agree to indemnify and hold harmless Brevard County Parks & Recreation, the Brevard County Board of County Commissioners, its municipalities, Charter Officers, Brevard County School Board and their agents and assigns and any licensees of the aforementioned against any liability, loss, or other injury whatsoever caused by or arising out of my, or the participant's, appearance on the program or any utterance made by me, or the participant, on the program or the use of any materials furnished for use by me, or the participant, on the program including reasonable costs and attorneys' fees. Brevard County Parks & Recreation permitting me, or the participant, to appear in their programs shall constitute its approval of this agreement.

Parent/Guardian Signature: _____ Date: _____

BREVARD COUNTY

PHOTOGRAPHIC AND OTHER MEDIUM RELEASE AND ASSIGNMENT CONSENT FORM

THIS AFFECTS YOUR LEGAL RIGHTS. PLEASE READ CAREFULLY BEFORE SIGNING BELOW.

Note: If I am under eighteen (18) years of age, I understand that I am not permitted to execute this Release and Assignment Consent Form without approval of my parent or legal guardian, who must execute this Form on my behalf.

CHECK APPROPRIATE BOX: for an adult for a minor under the age of 18

I, the undersigned, hereby grant to Brevard County, a political subdivision of the State of Florida, and those acting pursuant to its authority, the absolute right and permission to:

- a. Record my/the minor under my care’s participation and appearance on videotape, audiotape, film, photograph, or any other medium in connection with participation in or attendance at a Parks and Recreation Youth Program.
- b. Use my/the minor under my care’s name, likeness, voice, and biographical material in connection with these recordings.
- c. Exhibit or distribute such recording in whole or in part without restrictions or limitation for any legal purpose(s), including, without limitation, educational or promotional purposes, which Brevard County, and those acting pursuant to its authority, deem appropriate.

I further grant to Brevard County, and those acting pursuant to its authority, the right to copyright such pictures and images in its own name or to publish, market, and/or assign such pictures and images without further consideration, compensation, or report to me.

I hereby waive any rights and/or interests that I/the minor under my care might have in the pictures or images, including any rights to inspect and/or approve the finished photographs and images or the use of which the pictures and images may be applied so long as such use is lawful. Notwithstanding any prohibition as may be contained in Section 540.08, Florida Statutes, I hereby freely and voluntarily consent to the use and publication of my name, participation, and/or likeness by Brevard County, and those acting pursuant to its authority, including the entity seeking this consent, and photographs, videos, and/or audio recordings for any and all purposes including, but not limited to, education, promotional, advertising, and trade, through any medium or format, including, but not limited to, film, photograph, television, radio, digital, internet, or exhibition, at any time from this date forward until I revoke this consent in writing.

I hereby release any and all claims, demands, damages, and causes of action of any nature that currently exist or may exist hereafter against Brevard County, its affiliates, officers, directors, employees, and agents arising out of, or in connection with, my participation or attendance at the Event, including, but not limited to, any claims for defamation; invasion of privacy; invasion of right of publicity; misappropriation of likeness; infliction of emotional distress; negligence; any right, title, or interest in the photographs, videos, or other mediums of recording; or any other physical or monetary injury.

Without limiting the foregoing, I understand that any distribution of the images will be fully compliant with Brevard County policies, statements, and values. I release Brevard County, and those acting pursuant to its authority, from any liability related to the alteration, intentional or otherwise, that may occur in connection with the processing, editing, transmission, display, or publication of any such materials covered by this Form, and understand that images may be cropped or altered for purposes of illustration.

I HAVE READ THE FOREGOING RELEASE AND ASSIGNMENT CONSENT FORM BEFORE SIGNING BELOW. I WARRANT THAT I AM 18 YEARS OF AGE OR OLDER, OR THE PARENT AND/OR GUARDIAN OF _____, A MINOR UNDER THE AGE OF 18 YEARS, AND FULLY UNDERSTAND THE CONTENTS OF THIS FORM AND AUTHORIZE THE USE OF PHOTOGRAPHS, VIDEOS, AND OTHER MEDIUM BY BREVARD COUNTY, AND THOSE ACTING PURSUANT TO ITS AUTHORITY.

Check box if you DO NOT consent to the Photographic and Other Medium Release and Assignment Form.

Name of adult or guardian: _____ Signature: _____

Name of minor: _____ Age of minor: _____ Date: _____

BREVARD COUNTY PARKS AND RECREATION DEPARTMENT

PARTICIPANT

**CORONAVIRUS/COVID-19 RISK ACKNOWLEDGMENT
INDEMNIFICATION/ HOLD HARMLESS**

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. This is a community exposure and the Brevard County Parks and Recreation Department is taking all reasonable preventative measures in order to reduce the spread of COVID-19. However, the Brevard County Parks and Recreation Department cannot guarantee that the below-named participant, your family or yourself will not become infected with COVID-19.

By signing this Risk Acknowledgment Indemnification/Hold Harmless Form, I, _____ (hereinafter "named participant"), hereby acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that the named participant, my family or myself may be exposed to and/or infected by COVID-19 by participating in the above-referenced Recreation Program and that such exposure or infection may result in personal injury, illness, permanent disability and/or death. I understand that the risk of becoming exposed to and/or infected by COVID-19 by participating in the activity of the Recreation Program may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Brevard County Parks and Recreation Department employees, volunteers and other individuals. I, the parent/guardian of the named participant, voluntarily agree to assume all the foregoing risks and accept sole responsibility for any injury, illness and/or death to the named participant, my family or myself.

On behalf of the named participant, my family or myself, I hereby release, covenant not to sue, discharge, indemnify and hold harmless Brevard County, Florida, the Brevard County Parks and Recreation Department, its officers, employees, representatives, agents and assigns, of and from any and all claims, including all liabilities, actions, damages costs or expenses of any kind arising out of or relating to the named participant's participation in the Recreation Program.

I represent and warrant that I have carefully read and fully understand all of the provisions of this Risk Acknowledgment Indemnification/Hold Harmless Form.

Signature of parent/guardian is required for all participants under the age of 18 years.

Participant Signature: _____ Date: _____

If Applicable:

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____ Date: _____