

# Greene County Parks & Recreation General Registration Application

Return forms to:  
GCPR, P.O. Box 358  
Stanardsville, VA 22973

Program Name: \_\_\_\_\_ Fee: \_\_\_\_\_

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Home Phone \_\_\_\_\_ Day Phone \_\_\_\_\_

Street Address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Family Email Address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Shirt Size:    YS            YM            YL  
                  AS            AM            AL            AXL            AXXL

Please note any special medical conditions or known allergies that you would want medical professionals to be aware of in the event of an emergency: \_\_\_\_\_

**Refund Policy:** All requests for refunds must be submitted in writing and will take 4-6 weeks to generate payment from the Finance Dept. Requests for refunds after tryouts, team assignments or starting date will result in a 50% credit only. Any request for refund after games begin will NOT be honored.

**All registration checks are to be made payable to: GCPR**

**RELEASE:** In the event of an emergency, I give my permission for my child to be treated with emergency care. In consideration of your accepting this entry, myself, my child, my heirs, executors and administrator's waiver and release any and all rights & claims for damages I or my child have against Greene County Parks & Recreation, it's representatives, successors and assigns all risks and hazards incidental to such participation including transportation to & from activities; especially if transportation is provided by someone else. I further agree that I am responsible for my (and my child's) actions and behavior while at games and practices. In addition, I agree that I am responsible for the return of any equipment issued to my child - upon request or at the end of the season. If I fail to do so, I will be held liable for the cost incurred to replace the equipment. I also understand that I am responsible for replacing and repairing any damages which may occur to facilities and equipment, especially during unauthorized use or activities. I also acknowledge that pictures and digital images of myself/my child may be used by Greene County Parks & Recreation for promotional purposes. I understand that upon acceptance of this registration form, I am responsible for payment of all program fees and any penalties incurred.

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