

3280 Redstone Park Circle  
 Highlands Ranch, CO 80129 Phone: 303-791-2710 Fax: 303-470-9516  
 Registration forms are accepted by mail, fax or walk-in

**For more information on all recreation programs or to register online, please visit our website at [www.highlandsranch.org](http://www.highlandsranch.org)**

**General Information (please print)**

Head of Household/ Primary Contact Name	Home Phone	Work Phone	Cell Phone
Secondary Contact Name	Home Phone	Work Phone	Cell Phone
Address <input type="checkbox"/> check here if this is a new address	City		Zip Code
E-mail Address (You will be contacted via e-mail regarding receipts and programs unless requested otherwise)			
Emergency Contact		Emergency Contact Phone No.	

If you require ADA accommodations, please contact Recreation Services at 303-791-2710.

Registrant's First and Last Name (print)	Gender (M/F)	Date of Birth	Activity/Sport Name	Activity Number	Program Fee
Total Fees					\$ <input style="width: 50px;" type="text"/>

**Youth Sports Participants**

1. Are either parents/guardians interested in being a volunteer coach?  No  Yes-Head Coach  Yes-Asst. Coach  Maybe Name: \_\_\_\_\_
2. Team/coach request? (placement with requested coach is not guaranteed)  Yes Name of coach: \_\_\_\_\_
3. Name of friend(s) you would like to play with? (placement with friends is not guaranteed) \_\_\_\_\_
4. School Attending: \_\_\_\_\_ 5. Grade: \_\_\_\_\_ 6. Jersey Size: (YS, YM, YL, AS, AM, AL, AXL) \_\_\_\_\_

**Waiver and Consent Form (Signature required for all programs)**

**HIGHLANDS RANCH METRO DISTRICT INDEMNIFICATION AND WAIVER OF LIABILITY**

I hereby release and agree to indemnify and hold harmless the Highlands Ranch Metropolitan District, its representatives and agents from all claims or liability for damages and/or injuries incurred by me or my child in connection with the Highlands Ranch Metro District event or activity as described above. I further acknowledge I have independently reviewed and evaluated the risks and determined to participate in the program or allow my child to participate with full knowledge and acceptance of the risks. I understand that the Highlands Ranch Metro District does not provide any insurance for any accidents or injuries. I also agree that any photographs taken in programs are the property of Highlands Ranch Metro District and will be used at their discretion.

In recognition of my child being accepted to play in a Highlands Ranch Metro District sponsored youth sports program, I (we) agree to read and participate in the SportParent program by following the standards of conduct for parents listed below. I (we) understand that if standards are not met, I (we) may not be allowed to attend games and practices as determined by the league coordinator.

- |  |  |
|--|--|
| <ol style="list-style-type: none"> <li>1. Remain in the spectator area during competitions.</li> <li>2. Don't advise the coach on how to do the job.</li> <li>3. Don't coach your child during the contest.</li> <li>4. Don't make insulting comments to players, parents, officials, or coaches of either team.</li> <li>5. Don't drink alcohol or use tobacco products at events.</li> </ol> | <ol style="list-style-type: none"> <li>6. Cheer for your team.</li> <li>7. Show interest, enthusiasm, and support for your child.</li> <li>8. Be in control of your emotions.</li> <li>9. Help when you're asked to by a coach or an official.</li> <li>10. Thank the coaches, officials, and other volunteers who conducted the event.</li> </ol> |
|--|--|

Signature of Participant or Parent/Guardian (if participant is under 18 years of age) \_\_\_\_\_ Date \_\_\_\_\_

**Please Select Method of Payment – Payment must accompany registration form**

<input type="checkbox"/> Check (Check No. _____)	<input type="checkbox"/> Cash	<input type="checkbox"/> Visa	<input type="checkbox"/> MC	Acct No. _____
Please make check payable to: Highlands Ranch Metro District		<input type="checkbox"/> Money Order (No. _____)	Expires _____/_____/_____ MONTH YEAR	

Cardholder Signature \_\_\_\_\_