



Parks and Recreation Registration Form Inclusion + Accessibility Service Request Adults

Mission: The Somerville Parks and Recreation department (SPR) operates year-round programs throughout the City’s public facilities, playgrounds, schoolyards, and various other locations to promote positive and healthy activities for all members of the Somerville Community.

Activity _____ Session _____

Last Name _____ First Name _____ Gender _____

Street Address _____ City _____ Zip Code _____

Cell Phone _____ Other Phone _____ E-mail _____

EMERGENCY CONTACT

Name _____

Relation _____

Cell Phone _____

Other Phone _____

ALTERNATIVE EMERGENCY CONTACT

Name _____

Relation _____

Cell Phone _____

Other Phone _____

PAYMENT INFORMATION

Payment Required: Yes or NO Program Fee: _____ Check# _____

CASH NOT ACCEPTED - Please make checks payable to “Somerville Parks and Recreation”.

INCLUSION + ACCESSIBILITY SERVICE REQUEST

To request an accommodation for yourself, please describe the accessibility or inclusion services needed:

The following accommodations are generally available within 14-21 business days of notice. We are consistently building our capacity to offer additional accommodations.

- Large print, braille materials, or readers
- Service animals allowed in program
- Sign language interpreters
- Adaptive equipment
- Program modification
- Resources and information
- Cue cards
- Individualized activity support
- Trained staff
- Program schedule

CITY OF SOMERVILLE PARKS AND RECREATION

Persons with disabilities who need auxiliary aids and services for effective communication (i.e., CART, ASL), written materials in alternative formats, or reasonable modifications in policies and procedures to access the programs, activities, and meetings of the City of Somerville should please contact Adrienne Pomeroy in advance at 617-625-6600 x 2059 or apomeroy@somervillema.gov.

AUTHORIZATION, MEDICAL CONSENT AND LIABILITY RELEASE

I, _____ am willing to participate in the Somerville Parks and Recreation program.

By signing the space provided below, I understand and I agree to knowingly and voluntarily release and waive, and further agree to indemnify, hold harmless or reimburse the City of Somerville, the individual members, agents, employees and representatives thereof, as well as the supervisors of said activity, from and against, any claim which I, any parent or guardian, any sibling, or any other person, firm or corporation may now or hereafter have or claim to have (known or unknown, directly or indirectly or within or without the control of those released), for or on account of any losses, damages, personal injuries, pain and suffering, death, property damage, or contract claims resulting from, or arising out of, during, or in connection with my child/ward's participation in the Somerville Parks and Recreation program, or the ownership, operation, use, maintenance or control of any vehicle, equipment or goods provided or used in connection with the activity, or in any way connected with or arising out of instruction, training, emergency care, or operations incidental to participation in the activity. I understand that the City of Somerville does not carry any insurance relative to the activity or for injuries to others arising from participation in the activity.

In the event that I become seriously ill or injured, I consent to the administration of emergency procedures/treatment. I understand that City of Somerville employees or others will make every reasonable effort to immediately contact my emergency contact/s if illness or injury occurs.

I understand the contents of this authorization, medical consent and liability release and am aware that if I make any alterations to this form, it shall be rendered void and incomplete and shall not be allowed to participate in this program.

Signature of Parent/Guardian _____ **Date** _____

PHOTO RELEASE

Further, I agree to be photographed to be used for publicity purposes at the sole discretion of the City of Somerville. I understand and agree that Somerville may use any photograph taken at this event or in connection with participation or any other activity involving this program, including but not limited to those taken during an activity of any kind.

Signature of Parent/Guardian _____ **Date** _____

With my permission to share, I have the following existing medical or other conditions that may affect their participation in this program: _____

_____ My activities should be restricted by _____
I consent to sharing this information with the SPR and City staff, administrators, and volunteers (such as coaches) who require this information. I understand that I am obligated to update this information. I certify that no qualified medical person has advised that I should not participate in this program or type of activities.

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CITY OF SOMERVILLE PARKS AND RECREATION

CODE OF CONDUCT

The City of Somerville Parks and Recreation Department and Commission have adopted the following code of conduct as a result of its concern for good sportsmanship in cosponsoring activities. Sports/activities can be used as an opportunity for you to learn how to engage in healthy competition while maintaining respect for the opponents.

All parties to athletic competitions should adhere to the highest standard of positive support for the contestants. By participating in the City of Somerville's Programs, all parties must abide by the **Code of Conduct**. Violations may result in the loss of privileges at city facilities/fields.

1. I (and my guests) will be a positive role model for my children and encourage sportsmanship by showing respect and courtesy, and by demonstrating positive support for all players, coaches, officials and spectators at every game, practice or sporting event.
2. I (and my guests) will not engage in any kind of unsportsmanlike conduct with any official, coach, player or parent. This conduct could include booing, taunting, refusing to shake hands, or using profane language or gestures.
3. I will respect the officials and their authority. I will refrain from questioning, discussing or confronting coaches during the games, and will take time to speak with the officials or coaches at an agreed upon time and place.
4. I will remember that children participate to have fun and that the game is for the youths, not the adults.
5. I will demand a sports environment for my child that is free from drugs and alcohol and will refrain from their use at all youth sports events.
6. I realize that the purpose of my attendance is to observe a contest and support recreation activities, not a license to verbally assault others or be generally obnoxious.
7. I will respect the athletic facility in which I am visiting and will not damage or deface park or school property.

I have read and understand the Code of Conduct and consent to abide by all listed terms.

Signature of Parent/Guardian _____ **Date** _____