ECC Adult Sporting Leagues Participant Registration					
Participants Name:					
Program/League:		Program Code:		{	Section:
Team Name:					
Address:					
Phone # (H)	Phone # (W)		Phone # ©		
Email		Emergency Contact	l		
Code of Conduct					
I. Treat all referees, staff and players with respect 2. Officials decision is final 3. Fighting or foul play will not be permitted 4. Abuse of the facility will not be tolerated 5. Good sportsmanship will be mandatory 6. No hanging on rims (Basketball) 7. No food in gym 8. No drugs, alcohol or smoking permitted on ECC property 9. Players must be on time and ready to play at the scheduled time 10. Team shirt to be worn at all games 11. Follow the direction of ECC staff at all times  Payment Details I enclose a check payable to ECC for \$ or, please charge my □VISA □ MasterCard for \$  Card Number:    Name on Card:					
Consent When enrolled in an ECC program, I authorize emergency medical treatment for myself, as deemed necessary by the ECC staff, and I agree to assume the costs of any such treatment.  In consideration of accepting this registration and permitting the voluntary participation in ECC programs, rentals or events, I/We hereby waive, release, discharge, indemnify and agree to hold harmless [ECC] its board, employees, volunteers, officials, sponsors and other representatives from any and all claims, demands, costs, expenses, and compensation arising out of or in any way related to any injury or other damage that may result to said participant while attending and/or participating in any [ECC] sponsored event, including any physical or other injury caused by negligence of any such person while performing his/her duties at any time.  I authorize the ECC to have and use photographs and/or slides of the person/s named on this enrolment as may be needed for its records and/or promotional purposes.  Parent/Guardian signature  Date					