

QUILLIAN CENTER – ADULT SPORTS REGISTRATION FORM - REVISED JULY 2012

PLAYERS NAME: _____

MALE _____ FEMALE _____

HOME ADDRESS: _____
(STREET ADDRESS) (APT #)

(CITY) (ZIP CODE)

HOME PHONE: _____ OTHER PHONE: _____

E-MAIL ADDRESS: _____

SPORT REGISTRATION FOR: (CIRCLE) MEN'S BASKETBALL FLAG FOOTBALL SOCCER MEN'S SOFTBALL CO-ED SOFTBALL VOLLEYBALL	AGE DIVISION: ALL ADULT SPORTS PARTICIPANTS MUST BE 18 YEARS OF AGE.
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UNIFORM SIZE: (CIRCLE)

ADULT SMALL ADULT LARGE ADULT MEDIUM ADULT X-LARGE ADULT XX-LARGE

PAYMENT TYPE

CASH _____ CHECK NUMBER _____ TDL# _____

CREDIT CARD _____ CREDIT CARD TYPE _____

CARD NUMBER _____ EXP. DATE _____ / _____

PAYMENT RECEIVED BY _____

WAIVER, RELEASE, AND HOLD HARMLESS AGREEMENT

In consideration of being permitted to participate in the Quillian Memorial Center, Inc. ("QMC") Programs at the First United Methodist Church of Houston ("FUMC") (hereinafter "Programs"), I (the undersigned and/or parent or guardian of a minor participant in the Programs) assume all risks and hazards incidental to the conduct of the Programs and my participation in the Programs. I knowingly waive, release, absolve, indemnify and hold harmless FUMC and QMC, their Members, Trustees, Administrative Board, Committees and Staff as well as the organizers, sponsors, workers, and all others acting on behalf of the FUMC and QMC or their programs and activities, from any and all liabilities, claims, demands, causes of action, judgments, liens, potential claims and potential causes of action, known or unknown, now existing or that might arise hereafter, directly or indirectly resulting from, attributable to, or related to the Programs and/or any injury, death and/or property damage related to the Programs. I also understand that I and any children for whom I am the parent, custodian, or legal guardian may be photographed for publications of Quillian or First United Methodist Church of Houston. I also have read and agree to Quillian Center's Zero Tolerance Policy.

I agree that FUMC and QMC are not responsible for any medical expense I may incur and agree they will not compensate the Participant for any medical expense they may incur.

SIGNATURE: _____ DATE: _____ / _____ / _____

Quillian Zero Tolerance Policy

Anyone who acts contrary of sportsmanship in a Christian atmosphere and whose actions were in question shall be suspended for a two week period. During this time the league may hold investigations to determine if the conduct had a propensity to cause serious bodily harm, damage to property, or is otherwise in significant contravention of the Christian principles fostered by Quillian Memorial Center. If in the view of the Quillian Ministry Team and the Quillian Board, meeting for the purpose to make a determination on the suspension, rules by majority that the suspension was warranted, that party could be suspended up to 1 year. No refunds will be issued and at no time during the suspension will the party be allowed to attend or participate in activities at Quillian Center. Quillian Center may consider alternative forms of restrictions other than suspension.

Thank you for your cooperation with this policy. It is each person's responsibility to maintain fair play and sportsmanship in a Christian atmosphere.