JC Parks Stars Summer

Aquatics, Volleyball, and Track & Field Form

This form must be turned in before any athlete attends their first practice. Payment for state games will be due at a later date.

Athlete Information:

Name: _____ M or F
Address: _____ City: _____ Zip Code: _____
Phone: (Home) _____ (Work) _____ (Cell) _____
DOB: ____ - ____ - _____ Email: _____

Parent/Guardian or Staff (where athlete resides)

Primary: (Full Name) _____ Email: _____
Address: _____ City: _____ Zip Code: _____
Phone: (Home) _____ (Work) _____ (Cell) _____

Secondary: (Full Name) _____ Email: _____
Address: _____ City: _____ Zip Code: _____
Phone: (Home) _____ (Work) _____ (Cell) _____

What sport(s) are you participating in? ____ **Aquatics** ____ **Volleyball** ____**Track & Field**

Activity Number	SOMO State Activity		SOMO Fee
907464-01		Sport Only (no lodging)	$30
Bus Trips - Area, Regional and State			
907464-03		Bus Transportation	$10/trip

THIS FORM MUST BE TURNED IN BEFORE OR AT YOUR FIRST PRACTICE
Fees will be updated in your account at JC Parks based on the state fees and any trips you take using the bus transporation we secure.

Chaperone attending with athlete? ____ Yes ____No

If yes, chaperone name and contact info: _____

(Chaperone must have a Class A on file with SOMO)

SOMO State Outdoor Games - June 5-7, 2020 (Columbia)
Payment for State Fees are DUE BY: May 22, 2020

Payment Method:

Mail or drop-off payment **AND** this form to: Jefferson City Parks and Recreation, 1299 Lafayette St., JC, MO 65101

Cash: (enclosed) _____
Check: (enclosed) _____
Credit Card: Type: _____ Card #: ___ ___ ___ ___ - ___ ___ ___ ___ - ___ ___ ___ ___ - ___ ___ ___ ___ Exp. Date: ___ ___ / ___ ___
CVV ___ ___ ___

The undersigned releases the Jefferson City Parks and Recreation Commission, the Jefferson City Department of Parks and Recreation and its staff, the City of Jefferson, and activity co-sponsors from all liability. Any falsification on registration information will result in dismissal from the program with no refund allowed. The Department of Parks and Recreation has my permission, both during and anytime after to use the likeness, name, voice, or words of the participant in either television, radio, film, newspapers, and the media, and in any form for the purpose of advertising or communicating the purposes and activities of the Department of Parks and Recreation.

Signature: _____ Date: ____ - ____ - ____

Cancellation Policy: As per Special Olympics MO guidelines, registrations that are not cancelled at least two weeks prior to the event will be liable for the entire registration fee.