



GREATER HOUSTON POLICE ACTIVITIES LEAGUE

MEMBERSHIP REGISTRATION AND WAIVER FORM

Participant Information

Participant/Child's Name (first and last):

Date of Birth: Age: Gender: Male Female

Phone:

Ethnicity: Shirt Size:

School Attending: Current Grade Level:

Principal's Name: E-Mail (School Liaison):

Telephone #:

Household Contact Information

Parent or Guardian Name: Last: First: MI:

Street Address: Apt #:

City: State: Zip Code:

Primary Phone Number: 2nd Phone#:

E-mail Address:

Emergency Contact Information (other than above listed)

Name: Relationship: Phone:

Health Insurance: Yes No

Insurance Company/Organization:

Policy Number:

Medical Information

Any known medical conditions? Yes No

If yes, please specify:

Allergies to food/drugs, insects, plants, etc.? Yes No

If yes, please list:

Please initial (_____)

Participant's Name (first and last):

Image Release Waiver

I hereby consent to allow usage of photographs and video taken during all activities for publicity purposes in printed materials, videos, website and social media. I waive any right to inspect or approve the use of the images or recordings. **If you wish to allow photos or videos, please initial.** (_____)

Participation Waiver:

I/we, the parents/guardian(s) of the above named child, hereby give my/our consent for his/her participation in the Greater Houston Police Activities League (GHPAL). I/we assume all risks and hazards incidental to participation, including transportation to and from activities. I/we hereby waive, release, absolve, indemnify and agree to hold harmless, the City of Houston, the Houston Police Department, The Houston Police Department Greater Houston Police Activities League, The National Police Athletic League, the organizers, sponsors, supervisors, participants, volunteers and persons transporting my/our child to or from activities, from any claims(s) arising out of injury to my/our child, except to the extent and to the amount covered by accidental and liability GHPAL insurance.

I/we, fully understand that the Greater Houston Police Activities League Insurance is provided for accidents only when the parents do not have accident insurance that will cover the accident or when expenses incurred exceed parental insurance limits.

Parent or Guardian Name (**Please Print**)

Parent or Guardian Signature

Date:

RETURN THE FORM TO:

GHPAL@HOUSTONPOLICE.ORG