

***The philosophy of the Recreation and Parks Committee is:***  
**“KIDS FIRST - WINNING SECOND”**

The objective of our recreation program is:

1. To build confidence and skills in an organized, competitive atmosphere;
2. To provide each child with the maximum possible instruction and play time;
3. To assume that each child shall play in each game to the maximum extent possible, but under no circumstances play less than one-half of each game.
4. To assure that each child is to have fun.

To ensure achieving these goals, the Recreation Committee has instituted rules which guarantee maximum playing time for each child in each sport. These rules are available at the recreation office.

The Committee is confident that all of our coaches share this philosophy. If any misunderstandings do arise, parents should feel free to discuss the situation with the coach and/or the Recreation Director.

**REGISTRATION AND PARENT’S CONSENT FORM**

Recreation Office Telephone: (201) 847-8200  
 Franklin Lakes Recreation and Parks Department  
 1 Vichiconti Way, Franklin Lakes, New Jersey 07417

- |                                   |                                       |                                       |  |
|-----------------------------------|---------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> SOFTBALL | <input type="checkbox"/> BASEBALL     | <input type="checkbox"/> FOOTBALL     | <input type="checkbox"/> LACROSSE          |
| <input type="checkbox"/> SOCCER   | <input type="checkbox"/> CHEERLEADING | <input type="checkbox"/> BASKETBALL   | <input type="checkbox"/> TRAVEL BASKETBALL |
| <input type="checkbox"/> TENNIS   | <input type="checkbox"/> GOLF         | <input type="checkbox"/> OTHER: _____ |  |

NAME OF PARTICIPANT (Last, First, Middle Initial)		AGE	BIRTH
HOME ADDRESS		SEX	CELL PHONE NUMBER(s)
NAME OF SCHOOL		GRADE	OTHER EMER. PHONE NO.(please indicate)
GENERAL PHYSICAL CONDITION		E-MAIL ADDRESS	
PHYSICAL LIMITATIONS (if any, please explain)		I VOLUNTEER TO COACH OR ASSIST <input type="checkbox"/>	
		RECEIVED COPY OF ATHLETIC CODE OF CONDUCT <input type="checkbox"/>	

**Register Me for Borough “E-Blasts.”**  
 Through this E-Mail update service, you can receive periodic e-mails from the Borough with Borough news, emergency alerts, road closures, information on special events and upcoming meetings. Names and E-Mail addresses will be used by the Borough only for the purpose of sending out E-Mail updates. Once you are registered, you will be notified via E-Mail to confirm your registration for the E-Mail update service.

**Photographs of my child may be used for Borough publications and the Borough website.**  
 **Do not use photographs of my child for Borough publications and the Borough website.**  
 Photographs of children participating in Borough sports programs may be used in Borough publications such as the Borough newsletter or on the Borough website. Let us know whether we have your permission to use photographs of your child solely for these purposes by checking off the appropriate box.

*I consent to my child’s participation in the 20\_\_\_\_\_ program.*  
*I understand that all equipment issued to my child will be promptly returned at the conclusion of the program, and I agree to forfeit my uniform deposit if I do not return the uniform in good condition on the assigned date.*

**FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW THIS LINE**

FEE \$ _____	UNIFORMS DEPOSIT \$ _____	REC'D BY _____	DATE _____ <input type="checkbox"/> CHECK
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