



ST. LOUIS COUNTY POLICE ATHLETIC LEAGUE

7900 Forsyth Boulevard
St. Louis, Missouri 63105
314-615-5973
PAL@stlouisco.com



Visit our website at Stlouiscopal.com, like us on Facebook @ St. Louis County PAL, and follow us on Twitter @ StLouisCoPAL1

(PLEASE PRINT)

First Name _____ Middle _____ Last _____

Gender Identity _____ Ethnicity _____ DOB _____ Age _____

Address _____

City _____ State _____ Zip code _____

Current School: _____ Grade: _____

Parent/Guardian Name (PLEASE PRINT) _____

Parent phone _____ Email _____

Siblings who are also members of PAL (if any) _____

Medical Information:

Doctor Name _____ Doctor Phone _____

Permission for Treatment by Doctor/Hospital: Y / N

Serious Health problems? Y/ N If yes, explain: _____

Allergies? Y/ N If yes, explain: _____

Current medications Y/ N If yes, explain: _____

Alternate Emergency Contact information (Parent/ Guardian above will be called first)

Name _____ phone# _____

Name _____ phone # _____

Member/Contacts understood signed insurance disclaimer and permission statement: Yes / No

Parent/Guardian grants permission for member to be used in public relations materials: Yes / No (Initial __)

Physical: (for safety identification purposes)

Eye color _____ Hair Color _____ Skin Color/Features _____

Height _____ Weight _____

Areas of interest:

(Please circle all that apply. Used to plan future activities. Not all activities are currently offered)

Basketball

Soccer

Football (Flag and/or contact)

Boxing

Swimming/ Basic Water Survival

Volleyball

Cheerleading

Games (Electronic or board games)

Homework Help

Fishing/ Archery

Yoga/ Strength Training

Running/ Track

Cooking Lessons

Horseback Riding/ Care for horses

Other _____

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Creating positive change one relationship at a time."

PAL MEMBER BEHAVIORAL CONTRACT

Member section:

I, _____, (member) and we, _____, (parents/ guardians) enter into the following behavioral contract in order to create order and harmony at P.A.L. This contract will be reviewed when violated, at which time it is subject to either being continued or renegotiated. By our agreeing to the terms and conditions of this behavioral contract, all parties understand and accept that they are bound by the contract and are not free to vary from the terms and conditions.

I, _____, (member) agree that I will perform the behaviors below in the manner described.

I will not fight and understand a fight to be cause for immediate removal from the program.

I will not bring real or fake weapons.

I will not bring real or fake drugs.

I will not use foul language

I will not bring food or drinks onto the gym floor.

I will not use my cell phone unless granted permission to do so.

I will pick up after myself.

I will be a team player when participating in activities.

I will try to have a good attitude.

I will dress appropriately for the day's activities.

I will contribute and will volunteer help as needed.

I will use common sense to the best of my abilities.

I will seek the help of a supervising adult if I have a question or concern.

I will be respectful of other's belongings, beliefs, and bodies.

I agree that if I violate the contract by failing to perform the behaviors listed above, the following consequences will occur:

I will talk with an adult (PAL officer/volunteer/coach) about the infraction. If the violation is more severe, I will be temporarily removed from the activity and my parent/guardian will be notified OR I will be suspended from the program for a time determined by a PAL officer OR I will be permanently banned from participating in PAL activities.

Parent/ Guardian section:

I/We, _____ (parent/parents) agree that if _____ (PAL member) performs the positive behaviors as outlined above, my/our child will continue to earn the right to be a full participant in all applicable PAL activities.

All parties acknowledge that this contract is entered into voluntarily and agree the terms and conditions will be respected. All parties also agree that the consequences and fault of violating the behavioral contract lie with the PAL member.

Do you understand the terms of this contract? Yes / No

PAL Member signature _____ date _____

PAL parent/guardian signature _____ date _____

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Photo Release

I hereby grant the Police Athletic League of St. Louis County Missouri, Inc. and to its employees, agents, assigns, volunteers and sponsors the right to photograph my dependent and use the photo and/or other digital reproduction of him/her or other reproduction of his/her physical likeness for publication processes, whether electronic, print, digital or electronic publishing via the internet.

I, _____ (parent/guardian) certify I am the legal custodian of the below listed child and have the right to assign such permissions as outlined above.

Child's name (Print) _____

Parent/ Guardian signature: _____ Date: _____

Parent/ Guardian address: _____

Parent/Guardian phone number: _____

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Youth Athletic/ Activities Waiver and Release of Liability

In consideration with allowing the child whom I am considered to be the legal parent or guardian of, to participate in the St. Louis County Police Athletic/Activities League (SLCPAL) related events and activities, the undersigned acknowledges, appreciates, and agrees that:

- The risk of injury from activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
- I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation.
- I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence of participation, I will remove my child from participation and bring such to the attention of the nearest league employee immediately.
- I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS SLCPAL, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leasers of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
- I, on behalf of my participating child consent that the photographs, artwork, audio, video, or writing that is documented may be used by SLCPAL, its assigns or successors, in whatever way they desire, including television, CD-ROMs, web page, publications, and any other form for the storage, retrieval and reproduction of information, images; furthermore, I hereby consent that such information, photographs, videos, and the plates and/or tapes from which they are made shall be their property, and they shall have the right to sell, duplicate, reproduce and make other uses of such information, photographs, videos, recordings, and plates as they may desire free and clear of any claim whatsoever on my part.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTIONN OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Parent/Guardian name (Print) _____
Parent/Guardian signature _____ Date _____
Child name (Print) _____

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