## ENFIELD RECREATION DEPARTMENT PARTICIPANT FORM

124 North Maple Street, Enfield, CT 06082 860-253-6420 www.enfield-ct.gov/recreation

D.O.B.:	
Residency Check:	
Staff Initials:	

## **PROGRAM INFORMATION**

## **Adult Open Gym Basketball Information**

The Enfield Recreation Department hosts Open Gym Basketball time for adults 20 & over. Participants must show proof of age and residency to participate in addition to having a program waiver at the gym for the season. There is a daily fee for these programs. Please note that if the gym gets overcrowded, Recreation staff reserve the right to limit the number of people in the gym and residents will have first priority to play.

Days: Mondays and Wednesdays, December 9, 2024 - April 30, 2025

**Time:** 6:00 - 9:00 PM

Location: Enfield Annex Gym, 124 North Maple Street, Enfield, CT 06082

PROGRAM PARTICIPANT INFORMATION FORM - PLEASE PRINT CLEARLY		
Name:		
Street Address:	City/State:	Zip:
Primary Phone: ()	Email:	
Emergency Contact:	Relationship:	Phone:()
Do you have any medical, health or special If yes, please explain in detail:		
For complete information concerning the HIPAA Recreation Office for more information.	A Compliance Program, visit our website at v	www.enfield-ct.gov or call the
	RELEASE AND WAIVER	
In consideration for participating in the above-referenced and release the Town of Enfield, its agents, officers and er liabilities, costs, expenses and/or judgments, including above-referenced program/activity or any illness or injury referenced.	mployees, whether paid or voluntary, from and agains attorney's fees and court costs, which may arise	st any and all claims, suits, actions, damages,
I hereby represent that I understand and am familiar above-referenced program/activity. I further represent that physical or other health condition that would affect my or many conditions that would affect my or many conditions.	t I am, or my child is, in good physical and mental h	ealth condition and that I am unaware of any
I acknowledge that I will be solely responsible for the furnis	shing of all safeguards and appropriate equipment for	protection against injury.
Photo Release: The Recreation Department reserves the are for Recreation use only and may be used in future cata		purposes. Please be aware that these photos
Behavior Expectations: I understand that I and/or my child may result in dismissal from the program.	d must be able to abide by all rules and policies set t	forth by the said program and failure to do so
I have read this document and understand and agree to its	terms and conditions.	
PARTICIPANT/PARENT/LEGAL GUARDIAN SIGNA		DATE



## Enfield Recreation Adult Open Gym Basketball Participant Code of Conduct

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The Enfield Recreation Department has adopted a code of conduct for each person connected with the Adult Open Gym Basketball program. This code apply to all participants.

**Participant Code of Conduct** – I hereby pledge to provide positive support and encouragement for all players and staff connected with the Adult Open Gym Basketball program, by following this code of conduct:

- I understand that all participants must have a completed and signed waiver on file, in order to participate in the program.
- I understand that daily drop-in fees are due at the time of arrival to the staff person on duty.
- I will treat program staff with respect.
- I will treat the facility with respect and abide by parking lot markings and posted speed limits. I understand that the main function of the building is that of a multi-use Town of Enfield facility. Participants are expressly prohibited from using, or being under the influence of, drugs or alcohol while on-site. Conversations must be kept appropriate both in language and topic.
- I will assist in keeping the gymnasium clean and following all established Gym Rules:
  - No food or drink, other than water, is permitted in the gym.
  - No bouncing of balls against gym walls.
  - Sneakers must be worn on the gym floor.
- I understand that the only registered and paid participants are allowed in the gym during program hours.
- I will not wander into any other areas of the building not directly used by the program.
- I understand that established play rotation is in order of sign-in, unless otherwise agreed upon by participants.
- I understand that daily participation numbers will determine whether games are played full-court or half-court.
- I understand that if the gym is overcrowded, Recreation staff reserve the right to limit the number of people in the gym and residents will have first priority to play.

I have received, read and understand the Participant Code of Conduct policies for the Enfield Recreation Adult Open Gym Basketball program. I understand that violation of the above policies may result in remfrom the program.			
Participant Signature	Date		

Participant Name