Special Teams for Exceptional People 2019 Member Registration Form (Group Home)

Registration covers each member from May 1st, 2019 to April 30th, 2020. ~PLEASE PRINT~

• Membership fees are: \$75.00 per member / Wheelchair members are FREE

	(<u>Staff Only</u>)	Cash		Check	Money Order	
	Date of Payment:					
	Check / Receipt #					
Me	mber Name:					
	Please circle one:	Male	Female	Non-Verbal?	: Yes No)
Dat	te of Birth:/	/		1:1 Help Required?	: Yes No	١
A	All members that require	1:1 help mu	ust be accomp	panied by a parent/guardi	an or care taker at all tir	nes
		<u>Grou</u>	up Home Cor	ntact Information		
Со	mpany Name:					
0	Director Name:					
	Address:					
(City and State:			Zip Code	:	
Dire	ector Phone #: (_)				
				Contact Information		
Nar	me of Parent/Guardian:	<u>-</u>				
Ci	ity and State:				:	
				Cell Phone #: (
				e circle one): Hom		
	nail Address:	ive priorie i	oiasis (picasi	c on ole one).	ic # Och #	
	ilali Address.		0	£		
				rants during the year. Ple chances of being awarde		1
V	What disability does your child have?: /hat school does your					

child attend?:

Code of Conduct

I acknowledge "Article 3, Section 3" of the bylaws titled "Conduct" (copied below) and accept responsibility for the actions of my family and friends when participating in activities organized by S.T.E.P. I also acknowledge that I have received a copy of the "Code of Conduct" policy and accept responsibility for the actions of myself and child.

- 1. Rules of Conduct:
 - a. All members will, at all times:
 - i. Conduct themselves in a courteous and proper manner during all games and events.
 - ii. Make a reasonable attempt to control unruly crowds or spectators.
 - iii. Abide by and be responsible for knowing the rules and regulations of the organization.
 - b. All athletes will, at all times:
 - i. Conduct themselves in a courteous and proper manner during all games and events.
 - ii. Avoid causing damage or harm to their fellow athletes, to the facilities we visit, and to the equipment we use.
 - iii. Display the use of good sportsmanship.
- 2. Members are to respect the chain of command that is in place. Any questions, suggestions, or issues that arise should:
 - a. Be brought to the attention of the head coach or responsible event staff.
 - i. If no resolution can be made then:
 - Be brought to the attention of the Sports Director, Social Events Coordinator, or Fundraising Coordinator.
 - i. If no resolution can be made then:
 - c. Be brought to the attention of the Board of Directors.
- 3. All incidents whether medical, physical, improper or inappropriate behavior requires a written incident report to be filed with the Board of Directors by the complainant.
 - a. Incident forms will be made available to all members upon request.

In addition to the excerpt above, a standard "no drop-off policy" is in effect during all sports leagues, social events, fundraisers, and any other event coordinated by S.T.E.P. and held at all venues we visit for all members that are:

- A minor (age 17 and under)
- An adult (age 18 and up) that is not their own legal guardian

Parent/Guardian:	
Signature:	
Date:	/

Photography / Video Release

By signing this form you grant permission for S.T.E.P. to take photos and record video of your son/daughter and their siblings at any event organized by S.T.E.P. The photos/video may be for use on our website, social media accounts, and printed media. S.T.E.P. is not responsible if your son/daughter is captured while someone else is taking pictures/video.

Do you grant S.T.E.P. permission to take photos/video of your son/daughter as described above? (please circle one):	Yes	No
Parent/Guardian:		
Signature:		
Date://		

Special Teams for Exceptional People 2018 Sports Permission Form

Please fill out and return to S.T.E.P. with your registration form: ~PLEASE PRINT~

Member Name:	
Parent/Guardian:	
Signature:	

Feam Sports (recommended *age 6 and up)	Group Sports (open to all ages)		
Baseball	Bowling		
Basketball	Cheerleading		
Flag Football	Mini-Golf		
Floor Hockey	Fitness		
Kickball	Karate		
Volleyball	Skiing		
	Swimming		
(* = children younger than 6 years old may	Tennis		
participate when joined by a parent/guardian)	Track & Field		

	Please choose a size for your uniform						
Shirt (choose	Child	Small	Medium	Large			
one)	Adult	Small	Medium	Large	X-Large	XX-Large	XXX-Large
Shorts/ Pants	Child	Small	Medium	Large			
(choose one)	Adult	Small	Medium	Large	X-Large	XX-Large	XXX-Large

Please note: By signing above, you accept that you are responsible for the care of all uniforms provided by STEP. If the uniform is for a seasonal sport you need to return it. All uniforms must be returned in the same condition when they were issued. Otherwise you may be billed so that we can replace any damaged or lost uniforms.

Special Teams for Exceptional People 2018 Volunteer Information Form

One of the reasons STEP is able to offer so many wonderful programs is because we have parents, grandparents, siblings and friends who are willing to volunteer their time to help. Without people to coach a sport, work at a fundraiser, or setup on family day we simply could not exist. It doesn't take much to help keep things running for our athletes. All it takes is an hour a week during an athletic event, a few hours at a fundraiser or family day or maybe a little more as a Board Member.

When more people work together it makes the load lighter for everyone. This is where you come in. It is not a requirement that you volunteer but it is requested and greatly appreciated. Please consider this and check off any areas you may be interested in.

	Sports: (check all that apply)
I would be inte	erested in: Helping athletes on the field / court Being an Assistant Coach Being a Head Coach
	Fundraisers: (check all that apply)
I would be inte	erested in: Seeking out raffle items Setup / breakdown at venue Working at raffle / food tables
	Social Events: (check all that apply)
I would be inte	erested in: Shopping for decorations / gifts Setup / breakdown at venue Cooking / serving food
Boar	d of Directors: (must attend 3 board meetings before running for a position)
Would	you consider joining the Board of Directors? Yes No
	How can we contact you?
Your	Athlete
Name:	Name:
Phone #:	Email:

Special Teams for Exceptional People 2019 Sports Permission Form

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Parent/Guardian:	
Signature:	

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