

# Special Teams for Exceptional People 2025/2026 Member Registration Form

Registration covers each member from April 1 2025 to March 1 2026

**PLEASE PRINT**

Membership fees are: \$75.00 per member

<u>Staff Only</u>	Cash	Check	Money Order
Payment Receipt #			
Check/Receipt #			

Member Name: \_\_\_\_\_

Please circle one:    Male            Female                            Non - Verbal ?    Yes            No

Date of Birth:    \_\_\_\_ / \_\_\_\_ / \_\_\_\_                            Help Required?    Yes            No

All members that require 1: 1 help must be accompanied by a parent or guardian at all times.

### Parent / Guardian Contact Information

Name of Parent/Guardian: \_\_\_\_\_

Name of Sibling: \_\_\_\_\_

Name of Sibling: \_\_\_\_\_

Home Address: \_\_\_\_\_

City and State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

How do you want to receive phone blasts (please circle one):            Home #            Cell #

Email Address: \_\_\_\_\_

### Census Information

As part of our fundraising efforts we apply for many grants during the year. Please help us get to know our athletes a little more so that we can increase our chances of being awarded these grants.

What disability does your child have?: \_\_\_\_\_

What school does your child attend?: \_\_\_\_\_

## Special Teams for Exceptional People 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 interested in:  Helping athletes on the field / court  Being an Assistant Coach  Being a Head Coach

### Fundraisers: (check all that apply)

I would be interested in:  Donating for special events  Help with setup breakdown at venue  Working at raffle food tables at special events

### Social Events: (check all that apply)

I would be interested in:  Help decorating for events  Setup / breakdown at venues  Cooking / serving food or donating

### Board of Directors

Would you consider joining the Board of Directors?  Yes  No

### How can we contact you?

Your Name: \_\_\_\_\_ Athlete Name: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

## Special Teams for Exceptional People 2025/2026 Sports Permission Form

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

Member Name: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Signature: \_\_\_\_\_

What sports programs would you like to register your son/daughter for? (check all that apply)			
Team Sports (recommended *age 6 and up)		Group Sports (open to all ages)	
	Baseball		Bowling
	Basketball		Dance Movement
	Flag Football		Mini-Golf
	Floor Hockey		Fitness
	Yoga		Karate
	Volleyball		Cardio Drumming
	Soccer		Swimming
(* = children younger than 6 years old may participate when joined by a parent/guardian)			Outdoor Sports

### 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: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## 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:**
  - b. **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**
  
- **Bowling starts at 10:00am arrive at that time.**
- **Arrive no later then 10 minutes past the time for the sports.**

Parent/Guardian: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

# Special Teams for Exceptional People

## WAIVER OF LIABILITY

1. I hereby RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE Special Teams for Exceptional People, the Board of Directors, their venue hosts, sponsors, or volunteers (herein after referred to as RELEASEES) from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, while participating in such activity, while in, on or upon the premises where the activities are being conducted, REGARDLESS OF WHETHER SUCH LOSS IS CAUSED BY THE NEGLIGENCE OF THE RELEASEES, or otherwise and regardless of whether such liability arises in tort, contract, strict liability, or otherwise, to the fullest extent allowed by law.

2. I am fully aware of the risks and hazards connected with any activities coordinated by the RELEASEES, and I am aware that such activities include the risk of injury and even death, and I hereby elect to voluntarily participate in said activities, knowing that the activities may be hazardous to my property and me. I understand the RELEASEES do not require me to participate in this activity. I voluntarily assume full responsibility for any risks of loss, property damage, or personal injury including death, that may be sustained by me, or any loss or damage to property owned by me, as a result of being engaged in such an activities, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES or otherwise, to the fullest extent allowed by law.

3. I further hereby AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASEES from any loss, liability, damage, or costs, including court costs and attorneys' fees that Releases may incur due to my participation in said activities, WHETHER CAUSED BY NEGLIGENCE OF RELEASEES or otherwise, to the fullest extent allowed by law.

4. It is my express intent that this Waiver of Liability shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE, AND COVENANT NOT TO SUE the above-named RELEASEES.

**IN SIGNING THIS AGREEMENT, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of Liability, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Agreement for full, adequate and complete consideration fully intending to be bound by same.**

Parent/Guardian Name (Print):

FOR Member Name (Print):

\_\_\_\_\_

\_\_\_\_\_

Parent/Guardian Name (Sign):

Date:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Special Teams for Exceptional People 2025/2026 Volunteer Information Form

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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.

- I would be interested in being a Coach
- I would be interested in being a assistant Coach

Signature \_\_\_\_\_