



KIDS IN DISABILITY SPORTS, INC.
P.O. Box 1397
Lowell, MA 01853
1-978-473-8020
Website: www.kidsinc.us
Email: info@kidsinc.us

K.I.D.S. Registration Letter

Welcome to a new season with K.I.D.S., an organization dedicated to improving the quality of life for individuals with disabilities through sports programs and social/recreational activities and events (“**Programs**”) and helping them to build confidence, character and self-esteem, while teaching them the value of teamwork and cooperation.

Enclosed are the following documents:

- Policies and Procedures
- Registration Form
- Volunteer application

Please note that major revisions have been made to the enclosed Policies and Procedures and Registration Form as well as some revisions to the volunteer application. It is important that you carefully read them in their entirety.

A registration form must be completed for each member and **returned by August 18**. Please **entirely and clearly complete and sign** the Registration Form where indicated, and return that with your registration fee, as well as the Volunteer Application (if applicable), in the enclosed, self-addressed envelope. For returning member registrations post-marked (i) by August 18, the registration fee is \$100.00 per person per year; (ii) after August 18, the registration fee is \$125. For new members, the registration fee is \$100.00. Incomplete registrations or registrations received without applicable payment will not be accepted. Payment may be made by cash, check, Venmo (Kids-Gray), or PayPal or Credit Card at www.kidsinc.us. Please add “registration fee” in the note section where applicable.

Program sign-up is required and must be done in addition to registration. See the enclosed Policies and Procedures for important information regarding Program sign-up.

We ask Representatives to consider volunteering, as our Programs are entirely dependent upon volunteers and cannot take place without them. All volunteers must complete and submit a new application regardless of whether or not you have one on file with K.I.D.S., as it has been updated.

Funding for our Programs is entirely dependent on money raised via fundraising, donations, and grants. Your participation in these events is crucial to raising money to be able to continue providing the Programs that your loved one has come to enjoy. We will periodically provide Representatives with suggestions on how you can support these events and look forward to your cooperation in that regard.

Thank you for your continued cooperation. We are looking forward to a productive and successful upcoming season. If you have questions, please email info@kidsinc.us or call 978-473-8020, extension 1.

K.I.D.S., Inc.

KIDS IN DISABILITY SPORTS (K.I.D.S.) REGISTRATION APPLICATION

FOR K.I.D.S. USE ONLY

Registration fee: returning member \$100 postmarked on/before 8/18/25; \$125 postmarked after 8/18/25; new member \$100. For payments by Venmo, PayPal, and check, add "registration fee" in the note section.

Cash: ☐ Y ☐ N Venmo (Kids-Gray) ☐ Y ☐ N Check no.: _____ PayPal or CC (via website) ☐ Y ☐ N

SECTION 1: GROUP HOME REGISTRATION INFORMATION

Name:	Date of Birth:
Street:	Sex: ☐ M ☐ F New Member: ☐ Y ☐ N
City:	State & Zip Code:
Phone: <i>This number will be used as the primary contact number to leave messages regarding K.I.D.S. programs & events</i>	Supervisor 1 Name: Supervisor 1 Phone: Supervisor 1 Email Address:
Email Address: <i>This email address will be used as the primary email address to send emails regarding K.I.D.S. programs & events</i>	Supervisor 2 Name: Supervisor 2 Phone: Supervisor 2 Email Address:

SECTION 2: PARENT/FAMILY/GUARDIAN CONTACT *(Complete address, phone & email only if different from Section 1)*

Name:	Phone:
Street:	Email Address:
City:	Name of emergency contact (if different than parent/family contact):
State & Zip Code:	Phone of emergency contact (if different than parent/family contact):

SECTION 3: MEDICAL INFORMATION

Diagnosis: ☐ Verbal ☐ Non-verbal K.I.D.S. may be eligible to apply for grants that are dependent on the disability/diagnosis of our members (i.e., 25% of the population served must have autism, etc.). Such information will be used for this purpose only.

SECTION 4: PROGRAMS OFFERED

Please visit www.kidsinc.us for a list of team and individual sports programs and social and recreational events and activities (collectively referred to as "Programs") offered by K.I.D.S. and refer to the K.I.D.S. policies and procedures ("Policies and Procedures") for important information regarding participation in Programs. **In addition to member registration, Program sign-up is required on a Program-by-Program basis.**

SECTION 5: K.I.D.S. POLICIES AND PROCEDURES

Agreement to Policies & Procedures: In consideration of the opportunity afforded to the member and Representatives (defined in the Policies and Procedures) to participate in, attend, or assist with Programs, I acknowledge receipt of and confirm that I have read, understand, and agree to abide by the Policies and Procedures, which may be updated from time-to-time and posted to www.kidsinc.us. If I do not agree with any part of the Policies and Procedures, I understand that I will not be able to participate in, attend, or assist with Programs.

Parent/Guardian Signature: _____ Date: _____

Participant Signature: _____ Date: _____

(Participant signature required if 18 years or older)

Kids In Disability Sports, Inc., PO Box 1397, Lowell, MA 01853

Telephone: 1-978-473-8020 Email: info@kidsinc.us Website: www.kidsinc.us

All information is kept private & confidential

SECTION 6: PERMISSIONS AND WAIVERS

Permission to Participate/Medical Treatment: I hereby give permission for (1) the member mentioned above to (a) participate in Program(s), and (b) if applicable and in compliance with the Policies and Procedures, be transported to/from Programs, and (2) emergency medical treatment to be administered to the member mentioned above by medical personnel. I understand and agree that participation in Programs is contingent upon compliance with the Policies and Procedures by member and Representatives and expulsion from Programs or the K.I.D.S. organization may result from failure to so comply.

I further understand and agree that my and Representative's participation in and/or presence at Programs may include possible exposure to and illness from infectious diseases, including but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist. I acknowledge that the member and Representatives are aware there are risks to us of exposure to, directly or indirectly arising out of, contributed to, by, or resulting from an outbreak of any and all communicable disease, including but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof. **The member and Representative KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES (defined below) or others and assume full responsibility for our presence and/or participation.** I understand and agree that K.I.D.S. may determine requirements for the member to participate in Programs and the member and Representatives must comply with those requirements or be subjected to exclusion from Programs. **If at any time the member or Representative experience symptoms of any illness, including but not limited to, cold and flu symptoms, we will immediately notify K.I.D.S. and refrain from attending ANY Program until we are symptom-free for at least seven (7) days.**

Parent/Guardian Signature: _____ Date: _____

Participant Signature: _____ Date: _____
(Participant signature required if 18 years or older)

Permission for Photography/Videography: I give K.I.D.S. permission to use the member's and Representative's name, voice, or picture (video tape or photograph) obtained while attending or assisting with Programs and acknowledge that such use may appear on television, in print (newspaper, promotional materials, advertisements, etc.) or on the K.I.D.S. website.

Parent/Guardian Signature: _____ Date: _____

Participant Signature: _____ Date: _____
Participant signature required if 18 years or older)

Waiver of Liability: In consideration of the opportunity afforded to the member or Representative to participate in, attend, or assist with Programs, I hereby **RELEASE, DISCHARGE, AND COVENANT NOT TO SUE K.I.D.S.** or its officers, directors, administrators, agents, members, and volunteers (collectively referred to as "Releasees") and waive any right or cause of action arising as a result of the member's participation in or Representative's, attendance at, or assistance with any Programs which any liability may or could accrue against Releasees collectively or individually. Furthermore, I hereby waive, release, absolve, indemnify, and agree to hold harmless Releasees from any and all claims arising out of injury to the member mentioned above resulting from their participation in Programs. Without limiting the generality of the foregoing, I agree that this waiver shall include but not be limited to any rights or causes of action resulting from possible exposure to and illness from infectious diseases (such as COVID-19), personal injury to the member or Representatives, disability, death, or loss or damage to any person or property, including that caused in whole or in part by the negligence of the Releasees or otherwise. The member is participating as an individual and not as an employee.

K.I.D.S. **IS NOT RESPONSIBLE** for any injury or accident that may occur during the course of any Program, including but not limited to those resulting from member's or Representative's failure to comply with Policies and Procedures, or due to the falsification of any information on this form. I agree to notify K.I.D.S. of any changes to information in this form within 21 days of such change.

Participant Name: _____

Parent(s)/Guardian(s): _____

Brother(s): _____

Sister(s): _____

Parent/Guardian Signature: _____ Date: _____
(Participant signature required if 18 years or older)

Participant Signature: _____ Date: _____
(Participant signature required if 18 years or older)



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K.I.D.S. Policies and Procedures

Kids In Disability Sports (“**K.I.D.S.**”) started in 1995 and incorporated as a 501(c)(3) non-profit organization in 1999. It provides numerous year-round team and individual sports programs and social and recreational events and activities (collectively referred to as “**Programs**”) for individuals with disabilities. The following information will help you determine if K.I.D.S. is the right organization for you and your loved one. Participation in, attendance at, or assistance with K.I.D.S. Programs is contingent upon member parents, guardians, family, friends, and representatives such as group home supervisors (collectively referred to as “**Representative(s)**”), and member’s and volunteer’s compliance with all K.I.D.S. policies and procedures.

1. **Conduct.** One of the primary goals of K.I.D.S. is to promote fun, fair play, and respect for all K.I.D.S. members and volunteers who give their time to support the organization. It is expected that all Representatives and members will support and cooperate with K.I.D.S. volunteers and representatives in this effort. Additionally, language and conduct of members, Representatives and K.I.D.S. volunteers and representatives will at all times demonstrate high standards. Inappropriate language and conduct, including conduct deemed disrespectful or unsafe (for example, name calling; use of drugs, alcohol, or tobacco; etc.), will not be tolerated and will be subject to termination of the member, Representative, or K.I.D.S. volunteer or representative from Programs and membership, as applicable and at the sole discretion of K.I.D.S.
2. **Registration.** Registration in advance of participation in any Program is mandatory for all members. The minimum age to register with K.I.D.S. is six. There is no upper age limit. The season runs from September 1 to August 31. A registration form must be completed for each member and returned by the date specified in the Registration Letter. Incomplete registrations or registrations received without applicable payment will not be accepted. Information is kept confidential. Registration does not guarantee member’s spot in any Program.
3. **Registration Fee.** The registration fee is set forth in the Registration Letter. Registrations post-marked after the deadline set forth in the Registration Letter will incur a late fee. Payment of the applicable registration fee does not entitle Representatives to participate in any Programs except if doing so as a volunteer. That said, Representatives are welcome to participate in all social events as designated and specified by K.I.D.S. on a case-by-case basis.
4. **Program Sign-up & Attendance.** For K.I.D.S. to determine the equipment and number of volunteers needed for each Program, you will receive a communication when it is time to sign-up for a Program and must sign up the member on a Program-by-Program basis by the noted deadline. For the safety of the members and volunteers, some Programs have a maximum number of participants allowed. Program participation is on a first come, first served basis. Members or Representatives, as applicable, should note the start and end times of each Program. Members should be on time for the start of any Program and, for those members over 18 years of age, picked up no later than the Program end time designated by the coach or K.I.D.S. designee. The member or Representative must sign in each week with the coach or other designated individual.

If, after Program sign-up, the member is unable or decides not to attend the Program, a Representative must notify K.I.D.S. as soon as possible by email at info@kidsinc.us or by calling the designated phone number in the Program announcement and include the member’s name and message that they will not be able to attend. Additionally, notification is required if a member cannot attend any Program days (i.e., vacations, sickness, etc.). Failure to attend two consecutive sports programs without providing such notice will automatically terminate the member from the applicable sports program. The member or Representative may be subject to payment of a Program fee for failure to provide such notice. The Program fee varies, depending on the Program.

5. **One-on-One Assistance.** Because K.I.D.S. is staffed entirely by volunteers, we are unable to provide one-on-one assistance to members. Members should be able to take and follow directions given by coaches and volunteers with minimal redirection. Representative(s) are responsible for providing or arranging to provide one-on-one assistance for members requiring such assistance. K.I.D.S. reserves the right to determine if such assistance is required and communicate that to the Representative. If K.I.D.S. determines that such assistance is required, the member will be unable to participate in any Program until such assistance is in place. Additionally, K.I.D.S. reserves the right to assign members to Program slots that K.I.D.S. believes will provide the best and most rewarding experience for the member.
6. **Policies; Termination.** The safety and well-being of members and Representatives is K.I.D.S. primary concern. Participation in, attendance at, and volunteering for Programs is subject to compliance with all of K.I.D.S. policies and procedures. K.I.D.S. reserves the right to terminate membership in K.I.D.S., participation in and Representatives attendance at any Program, or volunteer's assistance with any Program for failure to comply with such policies and procedures.
7. **Medical Information.** It is the responsibility of the applicable Representative to determine if any Program will be harmful to the member's physical, mental, or emotional well-being and, if so, to avoid such Program, as K.I.D.S. is not responsible regarding such matters.
8. **Age; Transportation.** Members under 18 years old cannot be left at any Program unattended. Members 18 and over must provide emergency contact and applicable medical information when attending any social or recreational event or activity. Members and Representatives are responsible for their own transportation to and from Programs. K.I.D.S. is not responsible for members who are dropped off. K.I.D.S. coaches and volunteers should not transport members under the age of 18 to/from Programs without the express written permission of the member's parent or guardian. Members 18 and over who are able to make their own informed decisions may do so with respect to such transportation, however K.I.D.S. is not responsible for injuries, including death, resulting from such decisions.
9. **Member Siblings.** At the discretion of K.I.D.S., participation in Programs may be offered to member siblings. Sibling participation in team sports will be allowed if the member requires the sibling's one-on-one assistance, provided that the sibling is 13 years of age or older and completes and submits a volunteer application to K.I.D.S. at least 2 weeks prior to the start of the applicable Program.
10. **Volunteers.** Programs are entirely dependent upon volunteers and cannot take place without them. We ask that Representatives volunteer so that we can continue offering Programs to your loved ones. All volunteers must submit a volunteer application and those 18 and over must undergo a CORI check.
11. **Fundraising.** Funding for Programs is entirely dependent on money raised via fundraising, donations, and grants. Representative's participation in these events is crucial to raising money to be able to continue providing the Programs that your loved one has come to enjoy. We will periodically provide Representatives with suggestions on how to support these events.
12. **Communication.** K.I.D.S. posts important Program information to our website www.kidsinc.us which you should regularly check. Additionally, email and telephone communications are sent to our members throughout the year with important Program information, including start and end dates and times, locations, and cancellations. K.I.D.S. email address and phone number should be added to your applicable contact lists to ensure receipt of such notifications. Removal of spam and robo-blockers from your phone may be necessary. Prompt attention to these communications and "respond by" deadlines is necessary for K.I.D.S. to plan the Programs and ensures the member's participation, space permitting. Please promptly notify K.I.D.S. if your home address, email address, or phone number(s) changes to ensure you continue receiving our communications. Notification can be made by sending an email to info@kidsinc.us or by calling the registration info number below.

Contact Information

Mailing Address: Kids in Disability Sports, Inc. P.O. Box 1397 Lowell, MA 01853	Telephone: 978-473-8020 Ext. 1 – General Information Ext. 2 – Registration Information Ext. 3 – Sports Information Ext. 4 – Volunteer Information	Email: info@kidsinc.us Website: www.kidsinc.us Facebook: Kids in Disability Sports, Inc. Venmo: Kids@Gray
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If you have questions, please email info@kidsinc.us or call 978-473-8020, extension 1.