

Redwood Falls Recreation Department  
901 Cook Street  
Redwood Falls, MN 56283  
Phone: 507-644-2333 \*\*\* Fax: 507-644-2199

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## **RULES AGREEMENT FORM**

My team and I have read the rules of this league.  
We understand them and agree to abide by these rules and any necessary  
changes and/or additions that may be made throughout the season.

\*\*Please make sure to read the league rules, sign off on this form and turn this form in before your first league game. Your team is not eligible to participate in league play until this form is turned in. If you or any of your team members have any questions, please contact Tim at the Redwood Area Community Center.

The Minnesota Data Practices Act (Minnesota Statutes 13.04, Subdivision 2) requires when you are requested to provide private or confidential data about yourself. You must be informed of the following information:

- A) The purpose and intended use of the requested information;
- B) Whether you may refuse or are legally required to supply the information;
- C) Any known consequence to you of providing the information or refusing to provide the information; and
- D) The identity of other persons or agencies authorized by State or Federal Law to receive the data.

**In accordance with the Minnesota Government Data Practices Act, the Redwood Area Community Center (RACC) advises our customers of the following:**

The information you provide on this application is private data and not available to the public. The information you supply on the agreement or registration form will be used for the following reasons:

- To have all contact (emergency) information available
- To enable us to make rosters for activities
- To enable us to contact you if additional information is required, to send you appropriate notices

You are not legally required to provide this information, but we will not be able to register for an activity, purchase a membership or rent a facility without it.

The information you provide may be accessible to the following persons or entities:

- 1) You and persons who have your express, written consent may receive the information;
- 2) RACC officials (City of Redwood Falls) officials and staff members who have a need to know about the information in the course of their duties or responsibilities;
- 3) A law enforcement agency that requests access to the data in connection with an investigation;
- 4) A school for purposes of compiling pupil census data;
- 5) The Metropolitan Council for use in studies or analyses required by law;
- 6) A public child support authority for purposes of establishing or enforcing child support;
- 7) A person where use of the data directly advances the general welfare, health, or safety of the public; or

8) Credit or collection agencies to determine your credit rating or to assist in collecting on your account for services should it become delinquent;

In accordance with MN Statutes Sections 13.03 & 13.04, I acknowledge by signing this application form that I have been informed of and understand my rights under the Minnesota Government Data Practices Act and hereby consent to the release of the above information for those purposes as stated herein.

**VERIFICATION OF RECEIPT AND ACKNOWLEDGEMENT OF RESPONSIBILITIES**

**Also** by signing below, I verify that I have received the *Redwood Area Community Center's Registration Waiver and/or Rental Agreement Waiver and/or Membership Agreement Waiver* and I understand my responsibility to read the contents.

I UNDERSTAND THAT PARTICIPATING IN THIS ACTIVITY PRESENTS CERTAIN RISKS. I ACKNOWLEDGE THESE RISKS. I HAVE TAKEN THE PROPER STEPS TO PREPARE FOR THIS EVENT, AND UNDERSTAND THE POSSIBLE DANGERS AT HAND. I HEREBY RELEASE THE CITY OF REDWOOD FALLS RECREATION DEPARTMENT AND THE SPONSORS OF THIS EVENT FROM ANY AND ALL LIABILITY RESPONSIBILITIES, SHOULD I INCUR ANY INJURIES.

These waivers are issued to better inform customers of certain RACC policies. I understand that from time to time the RACC may issue additional policies or updates.

**Please sign below that you have read the above information:**

\_\_\_\_\_  
Team Name

\_\_\_\_\_  
League

\_\_\_\_\_  
Team Manager Signature

\_\_\_\_\_  
Date