

### Waste Management Community Benefits Request for Donations

The City of Riviera Beach, in conjunction with Waste Management Inc. of Florida, has established a Community Benefits Policy, as amended in November 2011. Under the Policy each elected official shall be entitled to designate up to \$15,000 per year (\$7,500 on October 1<sup>st</sup> and \$7,500 on April 1<sup>st</sup>) for public purposes. Public purposes include, but are not limited to, charitable events, not-for-profit organizational events or programs and City functions or projects (which may include contributions to the City's Scholarship Fund or the City's Housing Trust Fund). All requests for donations must be presented to the City Council and approved by a majority of the City Council. The City will attempt to process all requests within fourteen (14) days of City Council approval.

Ineligible uses include the purchase of tables at events, campaign contributions, or payment for salaries or operational expenses. Funds cannot be used to cover an elected official's travel, meals, or for his or her personal benefit or gain or for the personal gain of relatives as defined by City Code, the Palm Beach County Code of Ethics, or state statutes, as applicable. Funds cannot be given to an entity/agency/organization for which the elected official is a director or officer.

| Name of Elected Official Sponsoring Donation: Terence D. Davis  |
|---|
| Legal Name of Organization: Riviera Beach Parks and Recreation Department   |
| Program/ Activity Name: 2018 Youth Football program Requested Amount: \$ 340.00   |
| Briefly describe the Program/Activity below <u>and</u> attach (1) a letter of request or a more detailed description of the Program/Activity; (2) non-profit status paperwork and (3) w-9 IRS form:  The office of Councilman Terence Davis District 5 will sponsor (4) local youth football registration application fee at \$85.00 per student. This is defray the cost for Riviera Beach students. |
| Mailing Address: 1621 West Blue Heron Blvd  |
| City: Riviera Beach State: Florida Zip: 33404   |
| Contact Person(s): Mr. Richard Blankenship (Parks Director)   |
| Phone: 561-845-4070 Fax: 561-842-2731   |
| Email Address: RBlankenship@rivierabch.com  |
| Name of Authorized Official:  Signature of Authorized Official:  Date: 5/24/2018  |
| ""Return the form to the Elected Official or the Legislative Office for processing.   |

# Waste Management Community Benefits Request for **Donations Approval by Elected Official**

| <sub>I,</sub> Terence D. Davis           | ,hereby certify that the donation to   |
|--|--|
| Riviera Beach Parks and Recreation       | complies with the City's Community Benefits  |
|  | n not an officer, director, partner, proprietor,   |
|  | the organization, its parent organization or   |
|  | tual relationship with or other obligation with to                                       |
|  | r subsidiary; (2) I have no relatives or business  |
|  | in section 112.312, Florida Statutes) who are employees, subcontractors or agents of the |
|  | or subsidiary; (3) The disbursement of the   |
|  | cial gain or loss or to the special gain or loss of                                      |
|  | s; and (4) I am not aware of any conflict of   |
| /  | g_amount to the organization will create for the   |
| City of Riviera Beach or myself.         | ( )  |
| Signature of Elected Official:           | Date: 5/24/18  |
| Amount Approved by Elected Official: \$_ | 340.00   |
| Amount Approved by Elected Official.     |  |
|  |  |
| City Co                                  | uncil Action   |
| Approved                                 | ☐ Disapproved  |
|  |  |
|  |  |
| Chairperson's Signature:                 | Date:  |
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#### CITY OF RIVIERA BEACH PARKS AND RECREATION DEPARTMENT



# **PRESENTS**

# 2018 YOUTH FOOTBALL CHEER & DANCE PROGRAM









| all Weight<br>irements |
|------------------------|
| 5-75lbs)               |
| -100lbs)               |
| -115lbs)               |
| -130lbs)               |
| -155lbs)               |
| minimum)               |
| 1                      |

Notice to Parents/Guardians: Awaiting 2018 Pop Warner Boundaries. If boundaries are revised or changed; may affect the participant's acceptance into the Riviera Beach Youth Football and Cheer Program.

## APPLICANT MUST PROVIDE COPIES OF ALL NECESSARY DOCUMENTS

Free Clinics starting June 9 thru 30, 2018, Mon & Wed 6pm-8pm Sat 10am-12pn

| X | List of items needed at the time of registration (deadline June 30th or until filled) | Date           | Staff            | Parent |
|---|---|----------------|------------------|--------|
|   | Football Registration Fees: \$85 Residents/\$95 Non Residents                         | Marian III San | V0-0-2-070       |        |
|   | Playoff Fundraising Goals: JPW, PW, JM, ULT \$300 per participant                     |                |                  |        |
|   | Cheer Registration Fees: \$45 Resident/\$55 Non Residents<br>\$100 Competition Fee    |                |                  |        |
|   | City Registration Form  | -              |                  |        |
| 4 | Birth Certificate   |                |                  |        |
|   | Participant Contract – Pop Warner   |                | 200 24 20 (1992) |        |
|   | A copy of valid insurance card & number   |                |                  |        |
|   | Physical Form – Pop Warner  |                |                  |        |
|   | Recent Photo - Wallet or Passport size only. (No more than 2 years old)               |                |                  |        |
|   | 2 Proofs of Residency: Utility bill or other government form. No cell phone bills.    |                |                  |        |
| 4 | Copy of a guardian's driver license. Must match residency.                            |                |                  |        |
|   | FINAL 2017-2018 Report Card (Registrations after June 25th)                           |                |                  |        |

To complete the registration process, all documentation on list must be submitted by 06/15/2018 or until filled. Failure to submit documentation, will forfeit your child's spot.

# HAVE QUESTIONS? CALL 561-845-4070

**WE NEED YOU!** Coaching and parent volunteer opportunities available. Please contact the Park & Recreation Administrative Office @ 561-845-4070.

#### CITY OF RIVIERA BEACH PARKS & RECREATION DEPARTMENT **REGISTRATION FORM**

#### \*\*TO REQUEST A REFUND - YOU MUST SUBMIT THE ORIGINAL RECEIPT APPROVED REFUND REQUESTS WILL BE GRANTED WITHIN FOUR (4) WEEKS AFTER SUBMITTAL.\*\*

DIRECTIONS: Exit on I-95 & Blue Heron Boulevard to"S" Avenue - Parks and Recreation Administrative Office located at the Barracuda Bay Aquatics Water Park Site.

| Cheer Fee: \$45.00 Resident \$55.00 Non-R   |  |
|---|--|
| \$95.00 Non-Resident Amount Enclosed:   | \$ Receipt #:  |
| Participant's Name:   |  |
| D.O.B:/Age:   |  |
| Address:  |  |
|   | State: Zip:  |
| Phone:  |  |
|   | Relation:  |
| Emergency Contact Phone:  | Alt Phone:   |
| Insurance Information Provided: Yes / No  | Provider:  |
| Provious Toom:  |  |
| PARENTA  ARTICIPANT HOLD HARMLESS: As a condition of participa njury or diseases of a temporary or permanent nature incurr gainst the City of Riviera Beach Recreation and Parks D ndersigned does hereby assume said risk as one of the or tiviera Beach harmless in the event of disablement into   | AL/GUARDIAN CONSENT  ation in this program, the undersigned agrees that in the event of disablement of the participant while in the program, that all claims or liabilities are waive Department, City of Riviera Beach, Florida and/or employees thereof and the dinary risks of participation in said program, and consequently holds the City or disease named by the undersigned in the program. PARTICIPAN  |
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- -Administration fee before class starts is \$15.00 or 15% whichever is less -0% Credit or refund after 1st class/Practice/Registration Closed
- -No Refund will be issued if notified after the session has begun. (All Programs)
- -Please allow 4 to 6 weeks before refund is mailed to you.
- -A doctor's note will create a pro-rated refund.

NOTE: By signing this form you acknowledge and agree to the terms of this document.

(Must return original receipt to P&R Admin. Office. Mailing address and contact phone number must be indicated on back of receipt).