

Registration Deadline:

I have read, understand, and agree to the registration/cancellation/refund/transfer policies.

Head of Household _____

Address _____

City _____ Zip _____

E-mail Address _____

Primary Contact Phone (_____) _____

Cell Phone (_____) _____

Father's Name: _____

Mother's Name: _____

Are you interested in volunteering for your child's team? (circle)

Coach Asst. Coach Team Coordinator (soccer only)

Name of the person interested in coaching or coordinating*:

*Volunteer E-mail (mandatory): _____

I understand that carpool, friendship, coach & practice locations cannot be honored. _____ (Initial required.)

Cash

Check **Check Refusal Fee:** A \$25 fee is charged for all returned checks.

Credit Card

Credit card information not required if paying in person

Card Type: American Mastercard Visa Discover

Card Number **Express** _____

Card Holder's Name _____

Expiration _____ CID# _____ (3 numbers on back of card)

Amount Charged \$ _____

Authorized Signature _____

Special Modifications/A.D.A

Please list any medications that need to be dispensed at programs, allergies or describe special modifications needed for successful inclusion into the program(s). A two week notice is recommended.

Participant	Gender	Birth Date	Grade	Uniform Size *	Program Name	I.D. Number

*Uniform (for Girls Fall Softball)

YS YM YL AS AM AL AXL

The Bartlett Park District reserves the right to photograph or videotape participants in Park District programs, facilities or parks for the District's promotional materials. If you would like to submit a photo for publication please send it to sfitzsimons@bartlettparks.org.

Registration/Brochure Waiver & Release

IMPORTANT INFORMATION

The Bartlett Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Bartlett Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for the below listed programs/activities must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

WARNING OF RISK

Recreational activities are intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity. Understandably, not all hazards and dangers can be foreseen. Depending on the particular activity, participants must understand that certain risks, dangers and injuries due to inclement weather, slip and falls, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and all other circumstances inherent to indoor and outdoor recreational activities exist. In this regard, it must be recognized that it is impossible for the Bartlett Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with these programs (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in these programs against the Bartlett Park District, including its officials, agents, volunteers and employees.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Participant's Name _____ Date _____

Participant's Signature (18 years or older or Parent/Guardian Signature is required for participation) _____

Payer's Last Name