

REGISTRATION FORM

**** Please use a separate form for each participant ****
 Forms dropped off at the Carroll Recreation Center Office, 716 N Grant Rd.
 Open Monday – Friday 8:00 AM – 5:00 PM

Participant's Name _____ Birthdate _____ Age _____ Gender: M F

Grade (Current 2016-17) _____ Member ____ Non-member ____

Parent/Guardian Name _____

Address/City/Zip Code _____

E-mail address _____ Phone _____

Please note any medical condition that you would want the staff to know about: _____

Program Registrations			
<u>Program Title</u>	<u>Date</u> (if choices)	<u>Time</u> (if choices)	<u>Fee</u>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
TOTAL			\$ _____

WAIVER FOR PARTICIPANT BY PARENT/GUARDIAN: I hereby give my full permission for my child to participate in the City of Carroll's (Parks & Recreation Department) activities. I agree to assume full responsibility in case of accident or injury while my child is participating or playing in a city sponsored activity, and do further release and hold harmless the City of Carroll, its agents and employees, from any liability for any personal injuries, including death or property damage, which may be incurred by my child while participating or playing in a city sponsored activity, including but not limited to any claim alleging that the injuries or damages were caused by defective equipment owned or furnished by the City, by defects or obstructions on real property owned by the City, or by negligence in the supervision of my child or others. If I determine it to be appropriate, it is my sole responsibility as parent or legal guardian to secure insurance for my child.

I also give permission for any photograph taken during the activity to be used for future City promotional materials.

NOTE: Parent or legal guardian **MUST** sign for any child participating in a City activity.

Parent or legal guardian for: _____ (child(ren) name)

Date: _____ Signature: _____

Refund Policy: We will refund a class fee if notified one week ahead of the scheduled class or if there is an unforeseen injury or illness.