

# Phoenix Park District Registration Form Program/Class: \_\_\_\_\_

### (Please print)

Participant Name		Age	Birthdate	Sex
Address	City		State	Zip
Telephone #				
Parent/Guardian Name	Cell #		E-mail Add	ress
Emergency Contact Name	Telephone	#	Relationshi	p
Please list any allergies, medical co	onditions or special ne	eds the partic	cipant may have.	
Participant's sizes. (please indicate	e youth or adult) T-s	hirt P	ants Soc	k
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## Waiver of Liability

### PLEASE READ AND SIGN THE WAIVER STATEMENT BELOW

(This waiver must be signed by all participating adults 18 years old and over, and/or by a parent or guardian for each participant under age 18)

As a participant in this Phoenix Park District program, I recognize and acknowledge that there are certain risks of injury and I waive and relinquish all claims I or my children may have as a result of participation in this program against Phoenix Park District, the Phoenix Park District Departments, and its officials (either elected or appointed), commissioners, officers, agents, employees, and volunteers. I further agree to indemnify, hold harmless and defend Phoenix Park District, the Phoenix Park District Departments, and its officials (either elected or appointed), commissioners, officers, agents, employees, and volunteers from and against any and all claims, suits or cause of actions, including reasonable attorney's fees, sustained or caused by myself or my child arising out of, in connection with, or in any way associated with the activities of this program.

I give my child/children permission to participate in this program, and on the child's behalf as parent and/or legal guardian I hereby waive, release and forever discharge any and all claims against the Phoenix Park District, the Phoenix Park District Departments, and its officials (either elected or appointed), commissioners, officers, agents, employed, and volunteers for damages and/or injuries which may arise from my child's participation in this program.

I, the undersigned, understand and acknowledge that participation in a recreational activity can be hazardous and I realize that no one should enter into a recreation activity unless the participant is medically able. I/We assume all risk associated with this activity including, but not limited to: falls, contact with other participants or equipment, effects of weather, equipment failure, and condition of playing area. I fully understand that it is my responsibility to ascertain if this specific activity contains other elements of risk that could prove to be harmful to a participant.

Having read this waiver and in consideration of acceptance of entry into the program, I and anyone entitled to act on my behalf waive and release Phoenix Park District. Phoenix Park District Departments, it's co-sponsors, their representatives and successors from all and against any and all claims, suits, or cause of actions, including reasonable attorney's fees, sustained or caused by myself or my child arising out of, in connection with, or in any way associated with the activities of this program.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

#### PHOTO RELEASE

I give my permission to the Phoenix Park District Departments to take my picture or my child's picture to use on all future advertising for Phoenix Park District programs. I also hereby consent to the use of my or my child's photograph or cinematic image without compensation.

SIGNATURE DATE \_