

# Activity Registration Form

Parks & Recreation Dept. (760) 633-2740 Community Center (760) 943-2260 Senior Center (760) 943-2250



## How did you hear about this program? (please check only one)

Past participant  Rec Guide online  Friend  Newspaper  School flyer  Banner  Other

## For Adult/Parent/Guardian to complete:

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ Zip code: \_\_\_\_\_

Home phone: (\_\_\_\_) \_\_\_\_\_ Work/Cell phone: (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

\*Required for internet registration's "Forgot My Password" feature. See e-mail privacy policy at bottom of page

Emergency contact: (other than parent) \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

## Course and participant information

Participant's name (Last)	(First)	Birth date	Grade	Sex	Course title	Course #	Start date	Fee*

\*Note: \$2.50 non-refundable registration processing fee added to each course registration. \$1 processing fee for Senior Center programs

Payment type  Credit/Debit (Visa/MC)  Check  Cash  Money Order  Gift Certificate

## Medical Information

Participant's name (Last)	(First)	Medication	Known allergies

## Release from Liability and Indemnification/Medical Emergency Release

"I certify that I, or as a parent or guardian of \_\_\_\_\_ intend to enroll myself or him/her in the above referenced activity. On behalf of myself or my child, I agree to waive and release the City of Encinitas, and its officers, agents, and employees, from and against any and all claims, cost liabilities, expenses, or judgments, including attorney's fees and court costs arising out of my or my child's participation in the City's Recreation program or any illness or injury resulting therefrom. I recognize that the activity can be dangerous to myself or my child and accept those dangers. I understand that if I or my child is injured, this waiver will be used against me and anyone else claiming damage because of myself or child's injury in any legal action. I agree that pictures/videos taken during program hours may be used for future City of Encinitas promotional purposes. I also understand that no employee or agent is authorized to modify this waiver.

In the event of sudden illness, accident or injury which may occur while said minor is engaged in activity supervised by the representatives, agents or assignees, when neither the parents, guardian or designated family physician can be contacted, I hereby give my consent pursuant to California Civil Code #25.8 for emergency treatment as shall be necessary under circumstances by any physician licensed under the Laws of the State of California in consideration of my or my child's participation in the activity, I hereby release and discharge City of Encinitas and its elective and appointive boards, agents, and employees from any and all claims for personal injury."

## Email Privacy Policy

Per policy #PR R005, email will only be used to provide most recent and relevant information regarding City Recreation programs. Emails will be for City program promotion only. Under no circumstances will e-mail addresses be sold to outside agencies. Email to you will not disclose other email addresses.

To be removed from the City's email list, check this box.

## Refund/Cancellation Policy

A full refund of course fees (excludes processing fee) will be issued for any course cancelled by the City. No refunds after programs begin. If you cancel at least five (5) working days before the activity starts, you will receive a refund. Transfers are permitted within same activity (day camp week to another day camp week), if requested at least five (5) working days before activity starts. \$20 processing fee for cancellations or transfers in Day Camp, Sports Camps/Leagues/Clinics, Jr. Lifeguard activities (per child, per session). Refunds are not issued for inclement weather. Refunds can take 2-3 weeks to process.

I certify that I have personally read and understand this Release from Liability and Indemnification and agree to the Email Privacy Policy and Refund/Cancellation Policy

Signature of: \_\_\_\_\_

Date: \_\_\_\_\_

Adult Participant  Parent  Legal Guardian

**EncinitasRecReg.com**