

ACTIVITIES REGISTRATION

Registration Form

Program Registration Information...

You may begin registering at any time after you receive this booklet. Waiver must be signed to process registration form.

Program Confirmation...

We will not send out confirmation notices. Please mark your calendars for starting dates and times. We will do our best to enroll you into your program of choice. We will call only to inform you of alternative choices, if you're entitled to a refund or if a balance is due.

Refund Policy...

There is a \$10 processing fee assessed for all refunds, unless refund is due to Hawthorn Woods cancellation of a program.

FAMILY LAST NAME <input style="width: 95%;" type="text"/>	FIRST NAME OF PARENT /GUARDIAN <input style="width: 95%;" type="text"/>
HOME ADDRESS (Please use full street names, P.O. Boxes or RFD addresses will not be accepted.)	
<input style="width: 98%;" type="text"/>	Resident <input style="width: 50px; height: 20px;" type="checkbox"/>
	Non-Resident <input style="width: 50px; height: 20px;" type="checkbox"/>
CITY / STATE / ZIP <input style="width: 98%;" type="text"/>	
HOME PHONE NUMBER <input style="width: 95%;" type="text"/>	ALTERNATE PHONE NUMBER <input style="width: 95%;" type="text"/>
E-MAIL ADDRESS <input style="width: 98%;" type="text"/>	
EMERGENCY CONTACT NAME / RELATIONSHIP <input style="width: 98%;" type="text"/>	EMERGENCY CONTACT PHONE NUMBER <input style="width: 98%;" type="text"/>

PARTICIPANT'S NAME / SEX	DOB/ (AGE)	PROGRAM	CODE	FEE
TOTAL				

SPECIAL NEEDS REGISTRATION

Name: _____

Please indicate special concerns: _____

Circle any that apply:

Allergies	Diabetes
Asthma	Fainting Spells
Behavior Disorder	Heart Trouble
Convulsions	Other: _____

Additional information: _____

Circle One: Cash Check Charge

Amount of Payment: _____

Make checks payable to the Village of Hawthorn Woods
For Charges Visa Mastercard
 Discover American Express

Cardholder Name: _____

Cardholder Signature: _____

Account Number: _____

Expiration date: _____ Authorization #: _____

REGISTRATION

Waiver & Release

Important Information...

The Village of Hawthorn Woods Park and Recreation Department is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. We continually strive to reduce such risks and insist 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 programs/activities listed 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 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, slips and falls, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises, defects, inadequate or defective equipment, inadequate supervision, instructing 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 Village of Hawthorn Woods Parks and Recreation Department 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 the identified programs, 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/activities (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 have (or accrue to me or my child/ward) as a result of participating in these programs against the Village of Hawthorn Woods Parks and Recreation Department, including its officials, agents, volunteers and employees.

I do hereby fully release and forever discharge the Village of Hawthorn Woods Parks and Recreation Department, including its officials, agents, volunteers and employees from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with these programs/activities.

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 via fax, my facsimile signature shall substitute for and have the same legal effect as an original form signature.

Parent, Legal Guardian (MUST sign if participant is under the age of 18) and/or Participant

Date

Participant MUST sign if 18 years or older

Date

PARTICIPATION WILL BE DENIED

If the signature of adult participant or parent/guardian and date are not on this waiver

(Revised 2/21/07)