

Registration Form

Yes, I have moved and my new address is below.

Payer's Name _____ Home Phone _____

Address _____

City _____ State _____ Zip _____

Email address: _____

Parent's Name _____ Home Phone # _____

Avoid Delays!

Be sure to include your signature on the bottom of the registration form. Please make checks payable to City of Sacramento for the correct amount when submitting your registration. Underpaid or incomplete registrations will be returned to you.

AQUATICS REGISTRATION

Course Number			Pool Name	Time	Start Date	Participant's Name	Age <small>If under 18yrs</small>	Fee
First Choice	2nd Choice	3rd Choice						

CLASSES REGISTRATION

Course Number	Activity Name	Location	Time	Start Date	Participant's Name	Age <small>If under 18yrs</small>	Fee

Cash

Check or money order enclosed payable to: **City of Sacramento** (A \$25 service charge will be charged for all returned checks)

Visa # _____ Exp. date _____

Verification Code (last 3 digits on signature strip) _____

MasterCard # _____ Exp. date _____

Authorized signature _____

Entered

I have read the Hold Harmless Agreement on the reverse (box must be checked to complete registration process)

Parent/Adult Signature _____ Date _____

You must read the above statements and sign this registration form to be registered into a City of Sacramento Recreation Program.

Hold Harmless Agreement For Participation In City Of Sacramento Recreation And Leisure Programs

Hold Harmless Agreement: I understand that serious accidents occasionally occur during recreation programs. Knowing the risk and in consideration of being permitted to participate in City of Sacramento recreation programs, I agree to assume all risks connected therewith. I agree to release and discharge in advance the City of Sacramento, its officers, employees and agents from any and all liability for personal injury, death or property damage connected with my participation even though that liability may arise out of their negligence or carelessness. This release shall remain in effect until revoked in writing. I also assume full responsibility for the above child's behavior and agree to pay for all damages to property or persons caused by the aforementioned. If a participant's behavior interferes with the program, I will be contacted. Further disciplinary problems may result in expulsion from the program.

Refunds/Cancellations/Transfer: The City of Sacramento reserves the right to cancel, combine or divide courses; to change the time, date or place of courses; to change the instructor; and to make other changes which become necessary to ensure a quality experience for the participants. Participants will be notified if the course is filled or canceled. Our staff will assist you in selecting another activity, registering for another course or receiving a refund. If insufficient enrollment causes an activity to be cancelled or in the event that the staff must cancel a course for which you have registered, we will contact you and offer you an option of transferring to another session or receiving a full refund check by mail in 3 weeks. No requests for refunds or transfers will be accepted after an activity has started, except in the case of the participant's illness, supported by written documentation from the family physician. If you cancel or request a transfer prior to the start of the activity, a \$5 processing fee per participant, per course will be assessed. Transaction fees are non-refundable.

Permission For Medical Treatment: In case of an accident or injury, I authorize a staff member of the city of Sacramento to call the 911 emergency number. I give my consent to any medical treatment felt necessary by an attending physician for the physical well being of the child mentioned above. I further understand that the responding medical emergency team will provide emergency treatment as they deem necessary for the safety and protection of my child at my expense.

Consent to Photograph, Film or Tape: I agree to have photographs, films, videotapes or tape recordings taken of me or minor child registered under my signature while participating in City of Sacramento programs. I permit these photographs, films or tapes to be released to be used in publications, promotional materials, web site, and for other public information purposes by the City of Sacramento. If I do not consent, Parks and Recreation staff leading the program for which I am registered must be informed of and record my non-consent.

Privacy Statement: The information you provide is accessible only by Department and Recreation registration staff. Course coordinators and instructors will receive only the name, current age, address, and phone numbers of participants. Email addresses will only be used for Department correspondence related to your registration, program promotions, and upcoming events. Your information will not be shared with other agencies, departments, businesses or individuals, except as required by law.

THREE QUICK AND EASY WAYS TO REGISTER FOR CLASSES

Internet Registration

Go to www.parksandrecreation.cityofsacramento.org to register online.

Mail In Your Completed Registration

With the correct fees to:

Registration

4623 T Street

Sacramento, CA 95819

Come and See Us to Register

- South Natomas Community Center, 2921 Truxel Road
10am-5:30pm, Monday through Friday
- Samuel C. Pannell Meadowview, 2450 Meadowview Road
8am-4:30pm, Monday through Friday
- Belle Cooleage, 5699 South Land Park Drive
8am-4pm, Monday through Friday
- Coloma Community Center, 4623 T Street
10am-4pm, Monday through Friday