

registration form

Directions: Please fill in all blank spaces. Missing information will delay your registration. Send your form to H-F Park District, 3301 Flossmoor Rd., Flossmoor, IL 60422 • 708-957-0300 • fax 708-957-8574

Name _____

Address _____ City: _____ State: _____ Zip: _____

Home Phone _____

Day Phone _____

Emergency Phone _____

Email Address: _____

Eight-Digit Code	Activity Name	Starting Day, Date & Time	First Name Last Name if Different	Sex	Birth Date M-D-Y	Fee
- [] []						
2nd choice - [] []						
- [] []						
2nd choice - [] []						
- [] []						
2nd choice - [] []						

Important Information: Homewood-Flossmoor Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. H-F Park District continually strives to reduce such risks and insists 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 this program/activity 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/programs 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 serious injury when

participating in any recreational activity/program. 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, slipping, falling, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and all other circumstances inherent to indoor and outdoor recreational activities/programs exist. In this regard, it must be recognized that it is impossible for H-F Park District to guarantee absolute safety.

Waiver & Release of All Claims & Assumption of Risk: Please read this form carefully and be aware that in signing up and participating in this activity, 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 and this program/activity (including transportation services/vehicle operation, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, 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 sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward), including its officials, agents, volunteers and employees (hereinafter collectively referred as H-F Park District).

I do hereby fully release and forever discharge the H-F Park District 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 this program/activity.

I have read and fully understand the above warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, your on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Participant's Name (PLEASE PRINT): _____

Participant's Signature: _____ Date: _____

PARTICIPATION WILL BE DENIED if the signature of the adult participant or parent/guardian and date are not on this waiver.

ENCLOSED
TOTAL

Payment Method:

- Check
- Cash
- Credit

I give permission to charge the enclosed total to my:

- Visa Master Card Discover

Account Number: _____

Expiration Date: _____

Any and all rules of H-F Park District regarding program refund will apply to my credit card charges.

Signature: _____

Do you need special accommodations?
 Yes No

Office Use Only: Date _____ Paid by _____ Initials _____