



City of Imperial Department of Parks and Recreation Registration Form

Name of Parent or Adult Registrant	Home Phone	email
Home Address: Street	Work Phone	Cell Phone
City	State/Zip	
Emergency Contact: Name	Relation	Phone

1 _____				
Name of Registrant	Date of Birth	If Child: Age/Grade		
Course Number	Title of Program	Fee Enclosed		
Session Number	Location	Day	Time	Date

2 _____				
Name of Registrant	Date of Birth	If Child: Age/Grade		
Course Number	Title of Program	Fee Enclosed		
Session Number	Location	Day	Time	Date

3 _____				
Name of Registrant	Date of Birth	If Child: Age/Grade		
Course Number	Title of Program	Fee Enclosed		
Session Number	Location	Day	Time	Date

I agree to abide by all Rules and Regulations of the City of Imperial Department of Parks and Recreation and Police Activities League. I acknowledge that my (my child) participation in programs offered by the City of Imperial exposes me (my child) to the risk of personal injury, death or property damage. I hereby acknowledge that I am voluntarily participating in this program and agree to assume any such risks. In consideration for being permitted to participate in the program, taught or sponsored by the City of Imperial, I hereby agree, for myself, my heirs, administrators, executors and assigns, that I shall indemnify and hold harmless City of Imperial, its officers, agents or employees from any and all claims, demands actions or suits arising out of or in connection with my participation in the program. I hereby release, discharge and agree not to sue the City of Imperial, Imperial Unified School District, its officers, agents or employees for any injury, death or damage to or loss of personal property arising out of, or in connection with, my participation in the program from whatever cause, including the active or passive negligence of the CITY, its officers, agents or employees or any other participants in the program. I hereby consent to my child's (children's) participation in this (these) programs.

NOTE: By signing this agreement, you are agreeing to release photo, video or film likeness rights to be used for any legitimate purpose by the event holders, sponsors, directors and their agents or assigns. REGISTRATION FEES ARE NON-REFUNDABLE AFTER FIRST DAY OF CLASS. PRIOR CANCELLATIONS WILL BE SUBJECT TO A \$25 PROCESSING FEE. I HAVE CAREFULLY READ THIS RELEASE, HOLD HARMLESS AND AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT IT IS A FULL RELEASE OF ALL LIABILITY AND SIGN IT ON MY OWN FREE WILL. I FURTHER CERTIFY THAT I AM THE PARENT OR GUARDIAN OF THE ABOVE NAMED PARTICIPANT.

Parent/Guardian: _____ Date: _____

Date received _____	Check # _____
Amount received _____	Cash \$ _____
Initials _____	Debit/Credit \$ _____
Receipt Number _____	

*Make check payable to City of Imperial
 Department of Recreation & Parks
 400 S. Imperial Ave.
 Imperial, CA 92251*