



## Program Registration

Participant's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Health Conditions and/or Disability (optional): \_\_\_\_\_

Medications (optional): \_\_\_\_\_

If Participant is a Minor Parent/Guardian/Caregiver Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

## Parent/Guardian/Caregiver Information (Emergency Contact)

Person to Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Person to Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## Program Agreement

- City staff are not permitted to administer medications.
- Participants who require assistance with personal hygiene, restroom skills or eating are welcome to participate, but MUST always be accompanied by a care provider.
- Proper respect shall be always given to participants and staff members.
- Participants who are sick are encouraged to stay home.
- Participants with behavioral needs must be accompanied by a parent/caregiver.
- Participants who engage in inappropriate or unlawful behavior will be subject to suspension and/or expulsion of the program.
- Participants are required to stay within the physical boundaries of the facility during program hours.
- Please inquire to make any special requests. Staff will make every effort to provide reasonable accommodations.

## Image Release Consent Form/Waiver

\_\_\_\_\_ I hereby give my permission to use my image in City promotional material

\_\_\_\_\_ I hereby do not give my permission to use my image in City promotional material

## Liability Waiver

I understand that the City of Lake Elsinore does not carry insurance to cover participants or spectators of activities sponsored by the City of Lake Elsinore. I hereby assume the risk of any injury, accidental death, communicable diseases, illnesses, viruses or that may be sustained in the pursuit of City of Lake Elsinore sponsored activities, and forever discharge the City of Lake Elsinore, its officers, agents, and employees from any actions, suits, damages, claims or judgement that may result from any property damage, personal injuries or illnesses that I might sustain while using equipment owned or in the possession of the City of Lake Elsinore or while engaged in sponsored activities. I also agree to indemnify, defend, and hold harmless the City of Lake Elsinore, its officers, agents, or employees from all loss, damages, liability, cost of expense, arising out of any acts or omissions of the City or its officers, agents, or employees. I also give permission to the City of Lake Elsinore to use any photos taken at events sponsored by the City of Lake Elsinore for promotion or as desired.

Signature (Participate/Parent/Guardian/Caregiver): \_\_\_\_\_ Date: \_\_\_\_\_