

CRYSTAL LAKE PARK DISTRICT FAMILY REGISTRATION FORM

(Mail to: One E. Crystal Lake Avenue, Crystal Lake Avenue, Crystal Lake, IL 60014

If paying by credit card, please complete the following:

Visa _____ Mastercard _____
 Credit Card Number: _____
 Expiration Date: _____
 Authorized Signature: _____
 Please Print Signature: _____

Payer's Information:

Last Name: _____
 First Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Telephone: _____
 Emergency Phone: _____

Special Needs Registration - Please attach to Registration Form					Office Use: Copy to:	Int.	Date
Activity Code	Activity Name	M V C K S Office Use	Fee	Participant's Last Name	Participant's First Name	Sex	Birthdate Mo/Day/Yr
Total Paid:							

I have carefully read the program waiver and release on the back of this form and understand that my signature is required below in order to participate in the Crystal Lake Park District Programs.

Signature of parent, guardian or adult participant _____ Date _____

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I have carefully read the program waiver and release on the back of this form and understand that my signature is required below in order to participate in the Crystal Lake Park District Programs.

Signature of parent, guardian or adult participant _____ Date _____

Crystal Lake Park District Waiver and Release of All Claims and Assumption of Risk

Read this form carefully and be aware that in signing and participating in this program/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 or I might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services, 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 may have (or accrue to me or my child/ward or I) as a result of participating in this program/activity against the Crystal Lake Park District, including its officials, agents, volunteers and employees (hereinafter collectively referred to as the Crystal Lake Park District).

I do hereby fully release and forever discharge the Crystal Lake 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 important information, warning or risk, assumption of risk and waiver and release of all claims. If registering on-line or fax, your on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Parent/Guardian Signature _____ Date _____

Participation will be denied if the signature of adult participant or parent/guardian and date are not on this waiver.

Crystal Lake Park District Waiver and Release of All Claims and Assumption of Risk

Read this form carefully and be aware that in signing and participating in this program/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 or I might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services, 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 may have (or accrue to me or my child/ward or I) as a result of participating in this program/activity against the Crystal Lake Park District, including its officials, agents, volunteers and employees (hereinafter collectively referred to as the Crystal Lake Park District).

I do hereby fully release and forever discharge the Crystal Lake 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.

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Parent/Guardian Signature _____ Date _____

Participation will be denied if the signature of adult participant or parent/guardian and date are not on this waiver.