

REGISTRATION FORM



SUNRISE RECREATION & PARK DISTRICT

SunriseParks.com • 7801 Auburn Blvd., Citrus Heights, CA 95610 • (916) 725-1585

Adult/Guardian Name (please print):						
Address:				City:	Zip:	
Home Phone:		Cell Phone:		Email:		
Name of Emergency Contact:			Relationship to Participant:		Phone:	
List any medical problems or prohibitions the participant has:						
Participant Name	Gender	DOB	Activity/Class Name/School	Code	Start Date	Fee
						\$
						\$
						\$
						Total Fees: \$

SUNRISE RECREATION & PARK DISTRICT AGREEMENT, WAIVER, & RELEASE

In consideration for being permitted by the above District to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death or property damage which I may have, or which hereafter may accrue to me, as a result in participation in said activity. This release is intended to discharge in advance the above districts, (its officers, employees, and agents) from and against any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons and District (or its officers, employees, or agents). It is understood that this activity involves an element of risk and a danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption or risk is to be binding on my heirs and assigns. I agree to indemnify and hold the above persons and entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity.

PARENTAL CONSENT: (to be completed and signed by parent/guardian if applicant is under 18 years of age)

I hereby consent that my son/daughter, participate in the above activity, and I hereby execute the above waiver, agreement, and release in his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of the death or any injury or property damage that said minor may sustain while participating in said activity.

PHOTOGRAPHY POLICY: Sunrise Recreation & Park District reserves the right to photograph facilities, activities and program participants for potential future use. All photos will remain the property of Sunrise Recreation & Park District. Commercial photography by any outside party at any District program is prohibited without express written consent.

CONCUSSION PROTOCOL FOR YOUTH SPORTS: I understand that sports concussion protocol information will be provided to me. I will also have access to sports concussion protocol information at sunriseparks.com/concussion, or at the District Office. I and my child will abide by the sports concussion protocols of Sunrise Recreation and Park District.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT AND I SIGN IT OF MY FREE WILL.

Adult Participant or Parent/Guardian (print)

Signature

Date

Note: By signing this agreement, you are agreeing to relieve Sunrise Recreation & Park District of liability for personal injury; wrongful death or property damage except as may be caused by the active negligence of Sunrise Recreation & Park District, to release photo rights to Sunrise Recreation & Park District and that you have access to the district concussion information.

THIS SECTION IS FOR STAFF USE ONLY	<input type="checkbox"/> Amex <input type="checkbox"/> Visa <input type="checkbox"/> MC	Check #:	Amount Paid: \$	
	Credit Card #:	CVC #:	Expires:	
Print & Sign Name:	Date:	Receipt #:		