

Des Moines Park & Recreation Registration Form

REGISTRATION IS ON A FIRST COME, FIRST SERVED BASIS Please <u>PRINT</u> and fill out <u>COMPLETELY</u>				TODAY'S DATE	
NAME OF ADULT PARTICIPANT/PARENT GUARDIAN				HOME PHONE	
				WORK PHONE	
LAST		FIRST		EMERGENCY PHONE/PAGER	
STREET ADDRESS					
CITY		STATE		ZIP CODE	
PARTICIPANTS NAME (First & Last)		BIRTHDATE	M / F	CLASS / PROGRAM TITLE	
				FEE	
				\$	
				\$	
				\$	
				\$	
METHOD OF PAYMENT			<p style="text-align: center;">CITY OF DES MOINES HOLD HARMLESS AGREEMENT</p> <p>I assume all risks and hazards of the conduct of the program. In case of injury, I waive all claims or legal actions, financial or otherwise, against the City of Des Moines, its organizers, sponsors, supervisors, employees, or any volunteers connected with the program unless injury is caused by the sole negligence of the City of Des Moines.</p> <p>I grant full permission to use photographs, videotapes, motion pictures, recordings or any other record of the program for any purposes.</p> <p>In absence of signature, payment of fees and/or participation in the program constitutes acceptance of these conditions.</p> <p>Signature of Participant _____ Date _____ (Parent/Guardian if participant is under age 18)</p>		
CASH	<input type="checkbox"/>	\$			
CHECK	<input type="checkbox"/>	\$			
VISA/MC	<input type="checkbox"/>	\$			
Name on Card					
Card #					
CVI#					
Exp. Date					
REC'D BY	DATE				
MAILING ADDRESS					
City of Des Moines Park & Recreation Dept. 1000 S. 220 th St., Des Moines, WA 98198 Phone: (206) 870-6527 / Fax: (206) 870-6587					
NOTE: Senior Center HCC classes require a separate registration form (available at the Senior Center or the Field House)					