

REGISTER TODAY!

Please **PRINT** clearly and complete all information. **One form per person.**

Birth Certificates are Required Upon Registration for Children Under the Age of 18

Participant Name: (Full Name) _____ Sex: Male Female

Age: _____ Birth Date: ____/____/____ School: _____ Grade: _____

Parent/Guardian Name (if minor): (Full Name) _____

Address: _____

City: _____ Zip: _____ Home #: _____

Work #: _____ Cell #: _____ E-mail: _____

Please list 3 persons (other than yourself) allowed to pick up the participant and/or be contacted in an emergency:

Name: _____ Day Phone: _____ Relationship: _____

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How did you hear about our programs? **Funfare! Magazine** **Past Participant**
 Flyer **Website** **Word of Mouth** **Other** _____

ACTIVITY CODE	ACTIVITY NAME	FEE

Please help us ensure that you and your child have a positive experience in our programs. If you or your child has any special health, accessibility or behavioral needs, please briefly describe:

You will be contacted by staff for further information.

GENERAL RELEASE

ON BEHALF OF THE ABOVE, I, THE UNDERSIGNED PARTICIPANT/PARENT/GUARDIAN, in consideration for the CITY OF BOYNTON BEACH through its Recreation & Parks Department providing facilities, instruction, transportation and supervision in the activity for which I/he/she has registered, do hereby (1) Assume all risks and responsibility of possible damage or injury involved through participation in said activity. I understand I am to furnish my own insurance in case of injury; (2) Request permission to participate in the activity with full knowledge that said activity could result in damage or injury to me/him/her. I will furnish a birth certificate for the above named upon request by the Recreation & Parks Department; (3) Agree to indemnify & hold harmless the City of Boynton Beach and/or its departments or agents from liability resulting from my/his/her participation of said activity; (4) Give the City of Boynton Beach Recreation & Parks Department permission to take photos and use them to publicize programs and use in media correspondence; (5) I acknowledge that the event/program/class/course in which I am/my child(ren) is/are participating is a community sponsored activity; (6) **For Creative Kids, Imagination Station, Colorful Creations and Small World classes only:** I, the parent/guardian of the above-named child, agree to stay on the premises during the hours my child participates in class and can be contacted immediately if necessary.

I have read and understand the General Release.

Participant/Guardian Signature: _____ **Date:** _____