



2010 Parks and Recreation Registration Form

Check here if your household has been approved for 2010 Fee Assistance. Staff will verify at time of registration.

Primary guardian: _____ Secondary guardian: _____
 Street address: _____ Street address: _____
 City/state/zip: _____ City/state/zip: _____
 Home phone: () _____ Home phone: () _____
 Work phone: () _____ Work phone: () _____
 Cell phone: () _____ Cell phone: () _____
 e-mail: _____ e-mail: _____

Emergency contact
 Outside household: _____ Phone number () _____
Name

Participant's first & last name	Grade 2010 - 11	Class/program name	Activity #	Section #	Start date	AM Code drop off*	PM Code pick up*	Shirt size** (if applicable)	Fee
			— — —	— —					\$
			— — —	— —					\$
			— — —	— —					\$
			— — —	— —					\$

If more space is needed for additional programs use reverse side.

**Place corresponding code for your program. Kota-Transportation code, Trips Playground-Site leaving from.*

***Please place the appropriate code for Kota, Jr. Team Tennis, Trips and Softball for the t-shirt size requested.*
YOUTH SIZES: YS, YM, YL, YXL ADULT SIZES: AS, AM, AL AXL.

Participant information requested on reverse side of this form is required for this registration to be processed.	Total Fee (this page) \$
<i>Complete payment information on reverse side of form.</i>	

_____ **INITIAL HERE** Waiver: I understand that participation in this activity or program is completely voluntary and that the activity or program being offered is for the benefit of the participant(s). The City of Bloomington and Bloomington Public Schools' Community Education shall not be liable for any claims, injuries or damages, of whatever nature, incurred by the participant(s) which are directly or indirectly attributable to the negligence, whether passive or active, of the City and School District, their agents or employees, arising out of, or in connection with the activity or programs. On behalf of the participant(s) and myself, I expressly release and discharge the City and School District, their agents or employees from any such claims, injuries or damages. I also understand this waiver includes any injuries that may result from the condition of facility used in the activity or program.

_____ **INITIAL HERE** Data Privacy: The data supplied on this form will be used to enroll you in a recreation and or social program. Some requested data is private. It is available to you and the City and School District staff who need this information to perform their duties, but is not available to the public. You are not legally required to provide this data, but City and School District staff may not be able to complete your registration and/or you may not receive updated information.

Parent Release Agreement: City and School District staff takes pictures, slides and videos of participants enjoying the activities for use in marketing and promotion of the programs. If I do not grant permission, I will send a letter to the City of Bloomington, Parks and Recreation expressing my wishes.

Parent/Guardian Signature _____	Date _____
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2010 Parks and Recreation Registration Form

Check here if you prefer to receive your receipt via e-mail when possible.

Participant's name: _____
 Date of birth: _____ Gender: _____
 Does participant need support for a disability? Y / N
Additional paperwork required, please call 952-563-8877.
 Allergies? Y / N (list) _____

 Medications? Y / N (list) _____

Kota/Jr. Team Tennis: Pair participant with: _____
Jr. Team Tennis info: USTA #: _____

Participant's name: _____
 Date of birth: _____ Gender: _____
 Does participant need support for a disability? Y / N
Additional paperwork required, please call 952-563-8877.
 Allergies? Y / N (list) _____

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Kota/Jr. Team Tennis: Pair participant with: _____
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			---	---					\$
			---	---					\$
			---	---					\$
			---	---					\$
*Place corresponding code for your program. Kota-Transportation code, Trips Playground-Site leaving from.							Total Fee (this page)		\$
							Total Fee (reverse)		\$
**Please place the appropriate code for Kota, Jr. Team Tennis, Trips and Softball for the t-shirt size requested. YOUTH SIZES: YS, YM, YL, YXL ADULT SIZES: AS, AM, AL AXL.							Total Fee		\$

Payment information

(Circle one) Discover Mastercard Visa Card number _____ - _____ - _____ Expiration Date: ____/____

Cardholder's Name: _____ Cardholder's signature: _____

Check # _____ (Payable to City of Bloomington) Cash \$ _____