

River Trails Park District Registration Form

1500 E. Euclid Ave., Mt. Prospect, IL 60056 847-255-1200 fax: 847-255-1285 touch tone: 847-788-0734 www.rtpd.org

Last Name _____ Child's last name if different _____ Date _____
 Address _____ City _____ Zip _____
 Home Phone _____ Alternate Phone _____ E-mail _____
 River Trails P.D. Res. Prospect Hts. P.D. Res. Mt. Prospect P.D. Res. Non-Resident (20% add'l. fee, max. \$20 per class)

Program Name	Code #	Participant's Name	M/F	Birthdate	Fee	GRADE when Program Starts
Ist						
Alt						
Ist						
Alt						
Ist						
Alt						
Ist						
Alt						

We welcome individuals with disabilities. Please describe any accommodations needed for successful inclusion in the program(s) _____ **Total Enclosed \$** _____
 _____ Check _____ Cash

CREDIT CARD PAYMENT Visa Mastercard Discover Card \$20 minimum

Card No.: _____ -- _____ -- _____ Expiration Date _____

Cardholder Name: _____ Authorized Signature _____ Charge Amount: \$ _____

WAIVER & RELEASE

IMPORTANT INFORMATION

The River Trails Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The River Trails Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for the listed programs/activities must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs.

You are solely responsible for determining if you or your minor child/ward are physical fit and/or skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

WARNING OF RISK

Recreational activities/programs are intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity/program. Understandably, not all hazards and dangers can be foreseen. Depending on the particular activity, participants must understand that certain risks, dangers and injuries due to inclement weather, slipping, falling, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and all other circumstances inherent to indoor and outdoor recreational activities/programs exist. In this regard, it must be recognized that it is impossible for the River Trails Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in the listed programs/activities, 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 might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services/vehicle operation, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in the listed programs/activities, 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 or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the River Trails Park District, including its officials, agents, volunteers and employees (hereinafter collectively referred as "River Trails Park District").

I do hereby fully release and forever discharge the River Trails 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 the listed programs/activities.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, your on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

ALL PARTICIPANTS MUST SIGN WAIVER

If participant is under age 18, parent or guardian must sign for them

SIGNATURE	PRINT NAME OF PARTICIPANT	DATE

PARTICIPATION WILL BE DENIED if the signature of adult participant or parent/guardian & date are not on this waiver.