Child Participant			Program Name
Participant Name			
Date of Birth		Age	Program Number (IF one listed) & Session
Grade	School		
	Adult Participa	nt	Medical Conditions ? No Yes
Participant Name			(Please circle one)
		Age	IF yes. Please Explain:
Parent / Guard	ian (Contact) Inf	formation:	
Name:		E	mail Address:
Address:			
City		_ State	_ Zip
Phone (Home) ₋		(Work)	(Cell)
In the event of an e	emergency, should th	ne above person listed no	t be available. Please list the name of the next emergency contact.
Name		Relationship	o:Phone:
Payment Information	on / (IF different tha	n above)	
Payor Name			Email Address:
Address:			
City	Stat	eZip	
Phone		Pa	ryment Type: CASH CHECK
However, if a class start date. No pho processed (upon ro Department. Refu	is on the verge of bone registration will leequest) up until the ands may take up to	eing cancelled due to low be taken. The hold harm second class. A full refun two weeks to process.	s. Registration will be taken until the day a program begins. enrollment, it may be cancelled a few days before the scheduled less waiver must be signed and submitted. Refunds will be d will be given if the class is cancelled by the Recreation City limits in the City of Big Rapids is considered a resident.
the City of Big Rapids against it for or on ac acts or omissions or t circumstances of the	and any employee the count of any injury or o hrough the negligence recreational activity. I	ereof, from all suits, claims a damage to person or proper of said individual/firm/orga understand that photograpl	the for a position in City of Big Rapids Recreation program, hereby releases and actions for damages of every name or description brought or claimed atty received or sustained by any party or parties, by or from any of the anization/his/her/its agents or employees, which arise out of the ans/video may be taken and approve of them being used for promotional epartment is not responsible for lost/damaged/stolen personal items.
Parent's / Legal Guardian's or Participant Signature			Date