

BURR RIDGE PARK DISTRICT

2012 SWIM LESSON REGISTRATION FORM

Family Last Name: _____

Street Address: _____

City & Zip: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

E-Mail Address _____



Burr Ridge Park District desires to meet the leisure needs of all residents. If you or a family member requires special assistance, please check the box at left. We will do our best to accommodate your requests.

Program Code	Program Title	REGISTRANT'S FIRST/LAST NAME	REGISTRANT'S BIRTHDATE	SEX M or F	AGE	FEE
					TOTAL FEE	

Cash Credit Check # _____

Discover VISA Master Card Authorized Signature _____

Printed Name _____

Card Number: | | | | - | | | - | | | - | | | | Expiration Date _____

PHOTO INFORMATION

On occasion, the park district staff or local newspaper photographers may take pictures of participants in our programs, classes, or events. Please be aware that these pictures are only for Park District use, most likely in future catalogues, brochures, pamphlets, flyers, website or for publication in a local newspaper.

Waiver on back of this Page Must Be Signed

The Burr Ridge Park District
SWIM PROGRAM WAIVER & RELEASE

IMPORTANT INFORMATION

The Burr Ridge 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 Burr Ridge 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 this program must recognize that there is an inherent risk of injury when choosing to participate in recreational activities.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or adequately 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

Swimming is intended to challenge and engage the physical, mental and emotional resources of each participant. However, despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury, including drowning. Understandably, not all hazards and dangers can be foreseen. The very nature of swimming is hazardous and risky, including but not limited to fatigue and overexertion, poor swimming skills, failing to avoid dangerous areas, horseplay, diving or cannon-balling into shallow water and striking the bottom or side of the pool, inadequate supervision or instruction, lack of conditioning, becoming disoriented, striking other swimmers, defective or inadequate equipment, striking one's head on the bottom when using a diving block, slip and falls on the deck or within the locker facility, chemical exposure and all other circumstances inherent to the sport of swimming. In this regard, it must be recognized that it is impossible for the Burr Ridge 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 this program/activity, 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 and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, 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 Burr Ridge Park District, including its officials, agents, volunteers and employees.

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, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

PLEASE PRINT

Participant's Name

Date _____

Participant's Signature

(18 years or older or Parent/Guardian)

PARTICIPATION WILL BE DENIED

If the signature of adult participant or parent/guardian and date are not on this waiver.