

Registration

Registration

Step 1 ❖ Family Information

Family's Last Name: _____ E-mail Address: _____
 Home Address: _____ City: _____ Zip: _____
 Home Phone: _____ Emergency Name & Phone: _____
 Father's Name: _____ Father's Work Number: _____
 Mother's Name: _____ Mother's Work Number: _____
 Physician's Name: _____ Physician's Number: _____

Step 2 ❖ Sign the Waiver

Waiver and Release of All Claims - Must Be Signed

Please read this form carefully and be aware that in registering 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 associated with this program/activity (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are 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 Elk Grove Park District, including its officials, agents, volunteers and employees.

I have read and fully understand the assumption of risk and waiver and release of all claims. My on-line check box or facsimile signature have the same legal effect as an original form signature.

Signature of Participant or Guardian (if participant is under 18) _____ Date _____

Step 3 ❖ 1st & 2nd choice programs for each participant (When including 2nd choice programs, please pay the higher fee)

Participant's Name	Sex	Birthdate	Program	Barcode	Age	Fee
	<input type="checkbox"/> F		1st Choice			
	<input type="checkbox"/> M		2nd Choice			
	<input type="checkbox"/> F		1st Choice			
	<input type="checkbox"/> M		2nd Choice			
	<input type="checkbox"/> F		1st Choice			
	<input type="checkbox"/> M		2nd Choice			
	<input type="checkbox"/> F		1st Choice			
	<input type="checkbox"/> M		2nd Choice			

Please describe any special accommodations needed for your enjoyment of this program: _____
 Total Fees: \$ _____

Step 4 ❖ Elk Grove Parks Foundation (Optional)

The Elk Grove Parks Foundation is a non-for-profit organization funded solely by donations and fundraising activities which support the Elk Grove Park District's commitment to excellence as well as providing financial assistance so all members of the Elk Grove community, may benefit from park district programs and activities. To learn more about Parks Foundation events, volunteers and contribution opportunities, visit the web site at www.elkgroveparks.org/parksfoundation.asp A charitable donation may be added to your registration. Your donation will help the Parks Foundation in the continued drive to provide outstanding parks and recreation opportunities through the Elk Grove Park District. If you would like to make a donation to the Parks Foundation, please add the desired amount to your total.

Yes, I'd like to make a donation in the amount of \$ _____ HOTReg Donations: Barcode #64823

OFFICE USE

Date: _____

Initials: _____

Step 5 ❖ Method of Payment

Amount of Payment \$ _____ Check # _____ Cash
 Visa MasterCard American Express Discover
 Card Number _____ Exp Date _____
 Card Holder (print name) _____
 Authorized Signature _____

Step ❖ Submit This Form

Mail-in, drop-off or Fax to an Elk Grove Park District office:
 Jack A. Claes Pavilion 1000 Wellington Ave. Elk Grove Village, IL 60007 Fax: (847) 437-8043
 Al Hattendorf Center 225 E. Elk Grove Blvd. Elk Grove Village, IL 60007 Fax: (847) 228-3489