



REGISTER NOW

Head of Household Information - Please Print

Last Name	First Name	DOB
Address	City	State
Primary Phone#	Email Address:	
Emergency Phone#	Contact Person:	
Special Accommodations Needed:		

Participant and Activity Information - Please Print

Activity Code #	Description	Last Name	First Name	Gender	DOB	Fee

Cash / Credit Card / Check Payments -BLACK OR BLUE INK ONLY Total Payment Received: \$

Please Complete When Registering for Extended Time, Preschool

School Attending _____ Start Date _____ # Days _____ AM _____ PM _____ BOTH _____

Auto Debit Option is Available for Extended Time, Preschool, Dance and Theatre

Do you agree to enroll in the Auto Debit Payment Option? Yes _____ No _____

Cardholder's Signature: _____ Print Name: _____

Crystal Lake Park District Waiver and Release of All Claims and Assumption of Risk

Important Information: The Crystal Lake 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 Crystal Lake 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 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 is physically 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 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. 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, slip and falls, 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 exist. In this regard, it must be recognized that it is impossible for the Crystal Lake Park District to guarantee absolute safety. **In the event of an emergency,** I authorize the Crystal Lake Park District to secure any/all necessary medical attention from my accredited hospital and/or ward and further agree that I will be responsible for any and all medical services rendered. I further understand that my signature is required below in order to participate in Crystal Lake Park District programs. **PARTICIPATION WILL BE DENIED** if the signature of adult participant or parent/guardian and date are not on this waiver. **I have read and fully understand** the important information, Warning of Risk and Waiver of Release of All Claims & Assumption of Risk on this form.

X _____

Signature of Parent/Guardian /Participant (18 years and older)

Date

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