

REGISTRATION FORM ~ ADULT
City of Artesia Parks & Recreation Department
 18750 Clarkdale Avenue, Artesia, CA 90701 (562) 860-3361
 11870 169th Street, Artesia, CA 90791 (562) 407-1723

Class/Activity: _____

(Please Print Clearly and Legibly)

Participant Name:		
Last:	First:	
Address:	City:	Zip:
Email Address:	Contact Phone #:	
Person to be called in case of an EMERGENCY:		
Name:	Relationship:	
Address:	Phone No.:	

Registration/Fees – Registration forms and program fees must be submitted prior to attendance in a program/class or event.

Registration Deadlines – Registration deadlines for all classes are one week before the first class. Registration submitted after the deadline will be assessed a \$5 late registration fee. Pro-rated prices are not offered to late registrations. Deadlines for excursions will vary, check with trip coordinator.

General Information - Carefully read, complete and sign the registration form. Mail or deliver the completed registration with the required fee(s) to the above address. **Check Payment(s) must be made payable to: "City of Artesia."** Credit and Debit cards with Visa or MasterCard logos are accepted. A flat fee of \$2.50 for transactions under \$100 **OR** 3% for all transactions over \$100 is applied to the transaction as a **nonrefundable convenience fee**.

Refunds & Withdrawals – **No refund will be issued for excursions unless it is cancelled by the City.** A **full refund** will be made only when a program or class is cancelled or discontinued by the City. Requests for refunds made before the start of a program or class will be assessed a 10% administrative fee. Requests made after the start of a program will be assessed a 25% administrative fee. No refunds will be granted for requests after the first week of a program or class. Please allow 2-3 weeks from the time of the refund request for refund processing.

Returned Checks - There is a \$10 service charge for checks returned for any reason. A stop payment on a check does not constitute official withdrawal. Failure to settle any returned check debt will result in additional collection fees.

WAIVER, RELEASE, HOLD HARMLESS, AND AGREEMENT NOT TO SUE

I, _____ (FULL NAME), fully understand that my participation in the _____ (hereinafter "event/class") exposes me to the risk of personal injury, death, communicable diseases, illnesses, viruses, or property damage. I hereby acknowledge that I am voluntarily participating in this event/class and agree to assume any such risks.

I hereby release, discharge and agree not to sue City of Artesia, its officers, employees, and instructor/coach _____ for any injury, death or damage to or loss of personal property arising out of, or in connection with, my participation in the event/class from whatever cause, including the active or passive negligence of the City of Artesia, its officers, employees, and instructor/coach _____ or any other participants in the event/class. The parties to this AGREEMENT understand that this document is not intended to release any party from any act or omission of "gross negligence," as that term is used in applicable case law and/or statutory provision.

I authorize the City of Artesia personnel, any hospital or emergency medical facility and the registered physicians licensed under the provisions of the medical staff of the facility, to perform any diagnosis or treatment necessary during my care. I will accept responsibility for the payment of any and all treatment provided therein including emergency rescue services.

In consideration for being permitted to participate in the event/class, I hereby agree, for myself, my heirs, administrators, executors and assigns, that I shall indemnify and hold harmless the City of Artesia, its officers, employees, and instructor/coach _____ from any and all claims, demands actions or suits arising out of or in connection with my participation in the event/class held at the City of Artesia.

I HAVE CAREFULLY READ THIS RELEASE, HOLD HARMLESS AND AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT IT IS A FULL RELEASE OF ALL LIABILITY AND SIGN IT ON MY OWN FREE WILL.

Date

Signature



City of Artesia Parks & Recreation Department
18750 Clarkdale Ave., Artesia, CA 90701
562-860-3361

COACH AND VOLUNTEER BACKGROUND

CANDIDATE INFORMATION FORM

Candidate's FULL LEGAL NAME (Printed)

First name

Middle Name (Required)

Last Name

Phone #

Email Address:

Social Security Number

Date of Birth

Current Address (No PO Boxes, please)

City

State

Zip Code

Candidate Signature

Date

Thank you for completing the application process!
*Please attach photocopy of Legal Identification/Driver's License