



# registration

Please **PRINT** your information:

Today's Date: \_\_\_\_\_

Participant's Last Name: \_\_\_\_\_ Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_

Work Phone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Please send me e-mail updates about Recreation classes and programs

Emergency Contact Name: \_\_\_\_\_ Emergency Contact Phone: ( ) \_\_\_\_\_

Each adult participant must sign below. In addition, the signature of a parent or legal guardian is required for youth registrations.

**WAIVER OF LIABILITY & PHOTO RELEASE:** In consideration of participation in a class or activity offered by the City of Sunnyvale Department of Library and Community Services—Community Services Division, I, the undersigned for myself and/or as the parent/guardian of the Minor named above, agree to indemnify and hold the City of Sunnyvale harmless and hereby waive, release and discharge any and all claims for damage, for death, personal injury, bodily injury or property damage which I and/or the Minor may have or which hereinafter may accrue to me and/or the Minor against the City of Sunnyvale, its City Council, employees, agents, volunteers, independent contractors, and instructors from and against any liability arising out of or connected in any way with my and/or the Minor's participation in this class or activity, even though that liability may arise out of negligence or carelessness on the part of the person or entities mentioned above.

I understand that accidents and injuries can arise from participation in this class or activity; knowing the risks, nevertheless, I hereby agree to assume those risks on behalf of me and/or the above named Minor and to release and to hold harmless all of the persons or entities mentioned above whom (through negligence or carelessness) might otherwise be liable to me and/or the above named Minor (or my/our heirs or assignees) for damages. It is further understood and agreed that this waiver, release and assumption of risks has been freely entered into and is to be binding on my/our heirs and assigns.

I have read and agree to the registration and program policies. Further, I agree to allow use of my image and/or that of the named minor, which may be captured through video, photo, digital camera or other media, for City of Sunnyvale promotional materials and publications. By my signature below, I acknowledge that I have read this document and understand its contents.

Check the appropriate box(es) and sign:  Participant (over 18)  Parent  Legal Guardian

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

My check is attached, made payable to: City of Sunnyvale. (NOTE: \$30 charge on all returned checks.)

Charge my:  MasterCard  Visa



Name of card holder \_\_\_\_\_

Signature \_\_\_\_\_ 3-Digit Security Code (on back of card) \_\_\_\_\_

Card No. |\_\_|\_|\_|\_|\_|\_|\_|\_| - |\_\_|\_|\_|\_|\_|\_|\_|\_| - |\_\_|\_|\_|\_|\_|\_|\_|\_| - |\_\_|\_|\_|\_|\_|\_|\_|\_| Expiration (MM/YY): \_\_\_\_ / \_\_\_\_

**AVOID FRAUD!** The City of Sunnyvale will never ask for your social security number when processing a City registration or reservation transaction. Please don't give it out.

**SPECIAL NEEDS:** Do you or your child have any special needs for this class or activity that we should know about?

First Name	Birth Date (if under 18yrs)	Class Name	T-shirt Size*	Class # (example: 123456.MC)		Class Fee
				1st Choice	2nd Choice	
Current Senior Center members can deduct \$5 per Senior Center class						—
Tax deductible donation toward City Recreation Programs						—

\*T-shirt Size for select classes only; see class description.

Sizes available are Youth: YXS, YS, YM, YL or Adult: AS, AM, AL, AXL



Total Fees

For office use only Receipt #: \_\_\_\_\_ Initial: \_\_\_\_\_