



City of Los Angeles - Department of Recreation & Parks ADULT CLASSES REGISTRATION FORM

Studio City Recreation Center
12621 Rye St. Studio City, CA 91604
Office: (818)769-4415
studiocity.recreationcenter@lacity.org



PLEASE PRINT CLEARLY

Use black or blue ink only.



PARTICIPANT INFORMATION

First Name Last Name

Date Of Birth Age Gender Female Male

Class Name Day/ Time

Class Name Day/ Time

Class Name Day/ Time

Emergency Contact Phone Number

Home Phone Work Phone Cell Phone

Full Address City

Zip Code E-Mail

Emergency Contact name Emergency Phone



PHOTOGRAPH CONSENT

I hereby grant Studio City Recreation permission to take photographs, and to publish those photographs for any lawful purpose, including, but not limited to, their website, social media accounts, and promotional materials, either digital or in print, in perpetuity.

Yes No



PARTICIPANT CONSENT

AGREEMENT ASSUMING RISK OF INJURY OR DAMAGE, WAIVER AND RELEASE OF CLAIMS AND AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT FOR PARTICIPANT.

In consideration of the City of Los Angeles acting through its Department of Recreation and Parks granting the above named the opportunity to participate in this activity. (Participant's name: The undersigned, does hereby agree as follows: **I AM AWARE THAT THERE ARE CERTAIN RISKS OF INJURY INHERENT IN THIS ACTIVITY. I WILL ABIDE BY ALL SAFETY REGULATIONS** and will make reasonable precautions to minimized the risks of injury or damage arising from participation in this activity; I knowingly assume all responsibility for all risks of bodily injury, death or property damage which the participant may sustains as a result; I understand that city of Los Angeles carries no insurance also I understand that the city has no obligation to obtain medical treatment for participants. Should it be necessary for the participant to have emergency care while participating in the class, I hereby give the City personnel my permission to use their judgment in obtaining medical care, and I give permission to the medical care provider selected by the City Personnel to render medical care deemed necessary and appropriate; except for the gross negligence or willful misconduct of the city, I waive all rights of recovery which I may have now or in the future, whether known or unknown, against the City of Los Angeles or its officers, agencies or employees, and I release, acquit and forever discharge the City from any and all liability for any bodily injury or other injury, damage, loss or expense, claims, demands, causes of actions, money damages, costs, loss of services or use, compensation, debts, including attorney fees, which result from or are in any way connected with participation in this or any other city program or related activities. **I HAVE CAREFULLY READ THIS AGREEMENT.** I understand what it means and my signature below is my own free act. I intend it to be legally binding. I also acknowledge that I have read and understand the payment. This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California. By Participating in our program, patrons agree to allow the City of Los Angeles, The Department of Recreation and Parks, Studio City Recreation Center, and it's partners, to use photographs, audio, video and testimonials of participant(s) for use in publicity materials free of any fee or usage charge.

Date Print Participant Name Participant Signature

City of Los Angeles - Department of Recreation & Parks
YOUTH CLASSES REGISTRATION FORM

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 **COVID-19 ACCEPTANCE OF RISK AND WAIVER OF LIABILITY**

Child's Name

Date

Pursuant to City of Los Angeles Ordinance No. 187219, beginning Monday, November 29, 2021, PROOF OF COVID-19 VACCINATION will be required for individuals eligible (ages 12 and over) for COVID vaccination to enter all indoor LA Parks facilities. All individuals that are eligible for COVID vaccination participating or entering an indoor facility must show PROOF OF COVID-19 VACCINATION. For those unable to provide PROOF OF COVID-19 VACCINATION, alternative programming is available. Information can be found here: bit.ly/rapalt.

COVID-19 ACCEPTANCE OF RISK AND WAIVER OF LIABILITY

By my participation I am fully aware that there are a number of risks associated with me and/or my child entering onto City of Los Angeles Department of Recreation and Parks (RAP) property, participating in RAP programs, and utilizing RAP equipment and facilities during the COVID-19 pandemic. This waiver, release, and other representations and covenants set forth herein are given in consideration for RAP permitting me and/or my child to participate in practice and/or conditioning during this emergency period.

Therefore, without limitation, I understand that I and/or my child could contract COVID-19 disease which could result in a serious medical condition requiring medical treatment in a hospital or could possibly lead to death.

 **REFUND POLICY**

REFUND POLICY: A non-refundable 15% administration fee will be assessed by the recreation center for any patron granted a refund, change or transfer per class or sports clinic. No full refund will be issued unless the class or clinic is cancelled by the recreation center. Once the class or clinic has started I am aware that there will be no refunds . **Please initial**

 **AGREEMENT**

On behalf of myself and/or my child and our heirs, successors and assigns, I knowingly and freely, assume all such COVID-19 related risks, both known and unknown, relating to my and/or my child's entry onto RAP property, participation in RAP programs, and utilization of RAP equipment and facilities as described above, and I hereby forever release, waive, relinquish, and discharge RAP, along with its officers, agents, employees, or other representatives, and their successors and assigns (collectively, the "City Representatives"), from any and all COVID-19 related claims, demands, liabilities, rights, damages, expenses, and causes of action of whatever kind or nature, and other losses of any kind, whether known or unknown, foreseen or unforeseen, (collectively, "Damages") as a result of me and/or my child entering onto RAP property, participating in RAP programs, and utilizing RAP equipment and facilities as described above, including but not limited to personal injuries, death, disease or property losses, or any other loss, and including but not limited to claims based on the alleged negligence of any City Representative or any other person related to COVID-19 sanitization. I further promise not to sue RAP or any City Representative, and agree to indemnify and hold them harmless from any and all Damages resulting from me and/or my child's contraction of COVID-19.

I acknowledge that I have read, understand, and consent to all of the policies and authorizations as listed on this document. By my and/or my child's participation I agree to follow and abide by these rules.

Date

Print Participant Name

Participant Signature