

# CLASS REGISTRATION FORM

Please fill in registration form completely and return it with payment by **credit/debit card, check or exact cash only**. Please follow registration procedures carefully. Applications cannot be processed without the form fully completed nor without a payment. A collection fee will be charged for each check returned by the bank. Please print clearly. Use one per family. Please fill in registration form COMPLETELY and sign.

Name (Parent/Guardian):			
Primary phone:		Alternate phone:	
E-mail:			
Address:		City:	Zip:
Name (Parent/Guardian):			
Primary phone:		Alternate phone:	
E-mail:			
Emergency Contact:		Phone:	

DAY	TIME if applicable	NAME OF CLASS	FEE	PARTICIPANT First & Last Name	M/F	AGE	DATE OF BIRTH

**CONSENT:** By registering I understand that I give my authorization to participate in the Winnetka Recreation Center programs and all activities therein. I further agree to relieve the City of Los Angeles Department of Recreation & Parks, its officers, agents, and employees from any liability for injury to myself or my child(ren) resulting from and/or in connection with the activities in its programs. I understand the Recreation Center CARRIES NO INSURANCE. I do hereby authorize the City of Los Angeles to act as agent for myself/my child(ren): to consent to any x-ray examination, anesthetic, medical or surgical diagnosis, treatment/hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and/or surgeon licensed under the provisions of the Medical Practice Act & on the medical staff of a licensed hospital; whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. This authorization is given in advance of any specific consent. This authorization shall remain effective for the duration of the program, unless revoked sooner in writing and delivered to said agent.

**PHOTO RELEASE:** By registering I agree to allow the City of Los Angeles Department of Recreation & Parks and the Winnetka Recreation Center to use photographs, video tapes, and testimonials of participants for use in publicity materials free of any fee or usage charge. As it is difficult to pull individuals out of photographs & film, I understand that there is not an options for myself or my child(ren) to be excluded.

**REFUND POLICY:** Full refunds are only issued when the Recreation Center cancels the activity. A 15% cancellation fee is assessed for all refunds. Changes or transfers per class, sports league or day camp registration may be assessed additional fees. After the first day of a session, the Recreation Center issues a partial refund to patrons withdrawing from the activity. Please allow 6-8 weeks for processing of all refunds. Credits or make-ups will not be given for classes missed by the patron.

**I have read, understand, and agree to abide by the above mentioned policies and practices.**

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

FOR STAFF USE ONLY			
RW#:	Date:	<input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> CREDIT CARD             AMOUNT:	INITIALS: