

Parent/Guardian Name: \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone #: \_\_\_\_\_

e-mail address \_\_\_\_\_

**Mail In/Drop Off Program Application**

Participant Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ M/F

(circle one) Member or Non-Member (note: membership must be active for length of program)

#1 Choice Program Name \_\_\_\_\_ Program Code \_\_\_\_\_

#2 Choice Program Name \_\_\_\_\_ Program Code \_\_\_\_\_

Participant Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ M/F

(circle one) Member or Non-Member (note: membership must be active for length of program)

#1 Choice Program Name \_\_\_\_\_ Program Code \_\_\_\_\_ Fee \_\_\_\_\_

#2 Choice Program Name \_\_\_\_\_ Program Code \_\_\_\_\_ Fee \_\_\_\_\_

Participant Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ M/F

(circle one) Member or Non-Member (note: membership must be active for length of program)

#1 Choice Program Name \_\_\_\_\_ Program Code \_\_\_\_\_ Fee \_\_\_\_\_

#2 Choice Program Name \_\_\_\_\_ Program Code \_\_\_\_\_ Fee \_\_\_\_\_

Participant Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ M/F

(circle one) Member or Non-Member (note: membership must be active for length of program)

#1 Choice Program Name \_\_\_\_\_ Program Code \_\_\_\_\_ Fee \_\_\_\_\_

#2 Choice Program Name \_\_\_\_\_ Program Code \_\_\_\_\_ Fee \_\_\_\_\_

**Payment Options** - payment must accompany application to be enrolled in any program

(circle one) **Check or Credit Card**

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name on Credit Card \_\_\_\_\_ Total Fee \$ \_\_\_\_\_

Signature \_\_\_\_\_

Enclosed Check # \_\_\_\_\_

**Please Note: Program fees are non-refundable**

**Please sign & return page 2 Release Form w/this application.**

# **RELEASE FORM**

*THE UNDERSIGNED ACKNOWLEDGES SIGNING THIS WAIVER & RELEASE FROM LIABILITY BEFORE COMMENCING RECREATIONAL ACTIVITIES.*

IN CONSIDERATION of being permitted to enter and use the facilities of the Witherell RecreationCenter and/or its grounds, or the Carter Community Building and/or its grounds, and any of the related amenities defined as including but not limited to, the gymnasiums, the weight room, the aerobic exercise room and the pool, and any of the outdoor fields and play areas and all walkways, concessions and other areas appurtenant to the same, or being permitted to compete, officiate, observe, work for, or for any purpose participate in any way in any events within these areas, EACH OF THE UNDERSIGNED. .

**1. HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE** the releasee and agrees to indemnify and forever save harmless the release from all liability to the under- signed for any and all loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned while the undersigned is in or upon the re- stricted area, and/or competing, officiating in, observing, working for, or for any purpose participating in the event;

**2. HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE** while in or upon the restricted area and/or while competing, officiating, observing, or working for or for any purpose participating in the event.

EACH OF THE UNDERSIGNED expressly acknowledges and agrees that recreational activities can be very dangerous and involve the risk or serious injury and/or death and/or property damage..

**THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT**, and further agrees that no oral representations, statements of inducement apart from the foregoing written agreement have been made.

**Date:** \_\_\_\_\_

\_\_\_\_\_  
**Signature/Parent Guardian**

\_\_\_\_\_  
**CCBA Employee Signature**