



# EUREKA PARKS & RECREATION DEPARTMENT

## Registration Form

Parent / Adult Name: \_\_\_\_\_ Participant's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Day Phone: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Gender: Male / Female      List any allergies / special medication, special needs or accommodations, below:

By registering to participate in these recreation programs, each participant realizes the inherent risks involved in the program and understands the nature of these risks. The City of Eureka does not provide coverage for any damages or injuries caused by participation in these programs. The City of Eureka provides no medical insurance. Accordingly, I hereby release the City of Eureka, together with its directors, officers, employees, volunteers, and agents from all liability, claims, demands, losses, or damages arising from participation in the program/event; and I further agree that if, despite this release and waiver of liability agreement I, my family, or anyone on behalf of myself, makes a claim released in this agreement, my family will indemnify and hold harmless each entity and person released herein from any and all litigation expenses, attorney fees, loss, liability, damage, or cost they may incur as the result of such claim. Please sign below in compliance with this policy. My signature on this form further gives my permission to the City of Eureka to take photographs/ video of me and my family if applicable, at this event and to use these images for future promotions and/or in the organization's publications and web media.

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

Program: \_\_\_\_\_ Session: \_\_\_\_\_ Date / Time: \_\_\_\_\_ Fee: \_\_\_\_\_

Program: \_\_\_\_\_ Session: \_\_\_\_\_ Date / Time: \_\_\_\_\_ Fee: \_\_\_\_\_

Program: \_\_\_\_\_ Session: \_\_\_\_\_ Date / Time: \_\_\_\_\_ Fee: \_\_\_\_\_

Program: \_\_\_\_\_ Session: \_\_\_\_\_ Date / Time: \_\_\_\_\_ Fee: \_\_\_\_\_

Total Amount: \_\_\_\_\_

**Please Note:** To ensure quality, all programs have a minimum and maximum enrollment and are filled on a first served basis. Priority is given to Eureka residents.

Please make checks payable to the City of Eureka - Payments in the forms of a check may be sent to the Eureka Parks & Recreation Department, 333 Bald Hill Road, P.O. Box 125, Eureka, MO 63025-0125. Cash payments may be received at the Parks & Recreation office located at the Eureka Community Center - 333 Bald Hill Rd. (Legion Park). Please call (636) 938-6775 with any questions.

**Cancellation Policy:** The cancellation fee for a program is \$5 prior to the beginning of the second class. Refunds will not be given if requested after the second class meeting unless for medical reasons. If a refund is requested for medical reasons, a prorated share of fees paid will be refunded. For special events or one day programs, requests must be made prior to the class. A full refund will be given for any program cancelled by the Parks and Recreation Department.

**Americans with Disabilities Act:** The City of Eureka complies with the Americans with Disabilities Act (ADA) which prohibits discrimination on the basis of disability. The City will make reasonable accommodations for individuals with disabilities who meet essential eligibility requirements for the desired programs. Individuals with disabilities may contact the City at (636) 938-5233 regarding special accommodations for enjoyment of programs. Those who use the Telecommunication Device for the Deaf (TDD) may reach the City through Relay Missouri at 1-800-735-2966.