

FIRST NAME _____ LAST NAME _____
 ADDRESS _____ STREET _____
 CITY _____ ZIP _____
 EMAIL ADDRESS _____ HOME PHONE _____
 () - X () - _____
 WORK PHONE _____ EXT. _____ OTHER PHONE (CELLULAR, EMERGENCY) _____

HAYWARD AREA RECREATION AND PARK DISTRICT REGISTRATION FORM



Make check payable to: H.A.R.D.
Mail to: 1099 "E" Street, Hayward, CA 94541
Fax to: (510) 881-6763
www.haywardrec.org

			FIRST CHOICE				SECOND CHOICE				FEES
Participant's First and Last Name	Sex	Birthdate	Class Name		Class Number		Class Name		Class Number		
		//									\$
		//									\$
		//									\$
NON-RESIDENT FEE IS ADDITIONAL \$10 PER CLASS											
# of classes _____ x \$10 per class =											\$
TOTAL AMOUNT DUE:											\$

LIABILITY AGREEMENT, WAIVER, AND RELEASE

I have carefully read description of class(es) for which I/we are registering and in consideration for being permitted by the Hayward Area Recreation and Park District to participate in the [above] activity [described in this brochure], I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the Hayward Area Recreation and Park District (its officers, employees, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or injury or property damage that I may sustain while participating in said activity.

PARENTAL CONSENT: *(To be completed and signed by parent/guardian if applicant is under 18 years of age)*

I hereby consent that my son/daughter, _____, participate in the [above] activity [described in this brochure], and I hereby execute the above Agreement, Waiver, and Release on his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of the death or injury or property damage that said minor may sustain while participating in said activity.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE HAYWARD AREA RECREATION AND PARK DISTRICT AND I SIGN IT OF MY FREE WILL.

Signature: _____
 Parent Guardian Participant Date: _____

PLEASE NOTE: Our registration software system will charge a non-refundable \$2 per transaction fee for online registration.

PAYMENT METHOD:

- Cash Client Credit Check: # _____
 Visa MasterCard Amex

Card Number:

Credit Signature: _____ Exp. Date: _____

IMPORTANT INFORMATION:

- Registration will not be processed unless ALL of the information is completely filled out and the liability agreement (left) has been signed.
- For confirmation, send a stamped, self-addressed envelope.

E-MARKETING SIGN-UP:

Yes, please sign me up for your e-news alerts including District related Constant Contact, Facebook, and District and program alerts. By checking this box you are providing our District permission to add your email address to our e-marketing contact list, used **only** for District e-marketing purposes. You may unsubscribe at any time you wish. Your emails will not be sold or used.