



Registration Form

Please **PRINT** your information. For Senior Center trips, please use the registration page in the "Steppin' Out Messenger" newsletter

Today's Date: _____ Participant's Last Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Work Phone: (_____) _____

E-mail Address: _____ Please send me e-mail updates about Recreation classes and programs

Emergency Contact Name: _____ Emergency Contact Phone: (_____) _____

Each adult participant must sign below. In addition, the signature of a parent or legal guardian is required for youth registrations.

WAIVER OF LIABILITY & PHOTO RELEASE: In consideration of participation in a class or activity offered by the City of Sunnyvale Department of Library and Community Services—Community Services Division, I, the undersigned for myself and/or as the parent/guardian of the Minor named above, agree to indemnify and hold the City of Sunnyvale harmless and hereby waive, release and discharge any and all claims for damage, for death, personal injury, bodily injury or property damage which I and/or the Minor may have or which hereinafter may accrue to me and/or the Minor against the City of Sunnyvale, its City Council, employees, agents, volunteers, independent contractors, and instructors from and against any liability arising out of or connected in any way with my and/or the Minor's participation in this class or activity, even though that liability may arise out of negligence or carelessness on the part of the person or entities mentioned above.

I understand that accidents and injuries can arise from participation in this class or activity; knowing the risks, nevertheless, I hereby agree to assume those risks on behalf of me and/or the above named Minor and to release and to hold harmless all of the persons or entities mentioned above whom (through negligence or carelessness) might otherwise be liable to me and/or the above named Minor (or my/our heirs or assignees) for damages. It is further understood and agreed that this waiver, release and assumption of risks has been freely entered into and is to be binding on my/our heirs and assigns.

I have read and agree to the registration and program policies. Further, I agree to allow use of my image and/or that of the named minor, which may be captured through video, photo, digital camera or other media, for City of Sunnyvale promotional materials and publications. By my signature below, I acknowledge that I have read this document and understand its contents.

Check the appropriate box(es) and sign: Participant (over 18) Parent Legal Guardian

Signature: _____ Date: _____

Print Name: _____

My check is attached, made payable to: City of Sunnyvale. (NOTE: \$30 charge on all returned checks.)

Charge my: MasterCard Visa 3-Digit Security Code (on back of card): _____ Expiration Date: _____



Card Number: _____ Name of Card Holder: _____ Signature: _____

AVOID FRAUD! The City of Sunnyvale will never ask for your social security number when processing a registration or reservation. Please don't give it out.

SPECIAL NEEDS: If you or your child has special needs related to this class or activity, please indicate. _____

First Name	Birth Date (if under 18 years)	Class Name	T-Shirt Size*	Class Number (example: 123456.MC)		Class Fee
				First Choice	Second Choice	
				.	.	\$
				.	.	\$
				.	.	\$
				.	.	\$
				.	.	\$
Current Senior Center members can deduct \$5 per Senior Center classes →						\$
TOTAL FEES →						\$

* **T-SHIRT SIZE** for select classes only; see class description. Sizes available are Youth: YXS, YS, YM, YL or Adult: AS, AM, AL, AXL

FOR OFFICE USE ONLY: Receipt Number: _____ Initials: _____