

# Brunswick Community Recreation & Fitness Center

## PROGRAM REGISTRATION

(Please Print)

Name of Class \_\_\_\_\_

Start Date \_\_\_\_\_ Start Time \_\_\_\_\_

Are you a Rec Center member? Yes \_\_\_\_\_ No \_\_\_\_\_

If not a member, are you a Brunswick Resident? Yes \_\_\_\_\_ No \_\_\_\_\_

Class Fee \_\_\_\_\_

Name (First) \_\_\_\_\_ (Last) \_\_\_\_\_

Address \_\_\_\_\_

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

Phone (H) \_\_\_\_\_ (W/Cell) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Age \_\_\_\_\_ Grade \_\_\_\_\_ Birth Date \_\_\_\_\_

***I have read the Program Refund Policy and Waiver and Release of Liability (on back of this form). I am aware while on city property or participating in city programs, myself or my child(ren) may be photographed for promotional use. I understand and agree to abide by all these policies.***

Signature \_\_\_\_\_  
(must be signed by parent/guardian for child under 18 years of age)

Please complete the entire application. Make checks payable to "City of Brunswick". Drop off the application with your payment or mail to: Brunswick Rec Center, 3637 Center Road, Brunswick, Ohio 44212.

### Below for Staff Use Only

Cash Check # \_\_\_\_\_ Visa MC Ref.# \_\_\_\_\_ G.C.# \_\_\_\_\_

Class # \_\_\_\_\_ Date \_\_\_\_\_ C/R \_\_\_\_\_

## BRUNSWICK PARKS AND RECREATION DEPARTMENT

Waiver and Release of Liability (please read before signing)

In consideration of being allowed to participate in any way in a Brunswick Community Recreation & Fitness Center program, related events and activities, the undersigned acknowledges, appreciates and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist: and,

2. I knowingly and freely assume all such risks, both known and unknown even if arising from negligence of the releasees or others and assume full responsibility for my participation.

3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence of participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,

4. I, for myself and on behalf of my heirs, assigns, personal representatives next of kin, hereby release and hold harmless the Brunswick Community Recreation & Fitness Center, and the City of Brunswick, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

5. I agree to allow photographs of myself or my child(ren) taken during Rec Center activities to be used for promotional purposes.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTANDING ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### FOR PARTICIPATION OF MINORITY AGE

(below age 18 at time of registration)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all releasees, and for myself, my heirs, assigns, and next of kin, I release and agreed to indemnify and hold harmless the releasees from any and all liabilities incident to my minor child's involvement or participation in these programs provided above EVEN IF ARISING FROM THEIR NEGLIGENCE.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Emergency Phone Number \_\_\_\_\_