Village of Even	dale Recreation D	epartment Partic	ipation Agreemen	
Participant Name(s) over 18 years (of age: [Please print]			Date of Birth
Address			StZip Co	ode
Home Phone NumberEmail				
If under 18 years of age, please li	ist name(s) below [Ple Date of Birth	ease print]:		Date of Birth
Participant Name		Participant Name		
Participant Name		Participant Name		
Participant Name				
Emergency Phone Number #1	Emerg	gency Contact		
Emergency Phone Number #2Physician's Name	Emerg Phone	gency Contact e Number		
Are there any medical conditions or special child (ren)? Please read carefully:			we should know about yo	u/your
I acknowledge that I am soldamage sustained through my particle have received a copy of this No dangers involved in such activities in travel to and from the site of such activities in acknowledge that participate injury and assume all such risks. I have minor, to participate in voluntary rewhile participating in such programs my minor, do hereby waive liability, any and all rights and causes of acunforeseen bodily and personal injurvoluntary participation in, or in any was I further covenant and agree Agents, or Officials for any claim for oprograms or athletic activities. I understand that the acceptate Council members or any agent or enimmunity by said Municipality, its Confurther, I understand that the period of my and my minor's, members of my and my minor's, members of my and my minor's, members of my and suffering under no legal disability carefully before signing. I verify the signature below the ASSUMPTION OF RISK AND COVENANT NOT TO SUE, which are	Ito and from such activishe has the prerequisite setheir safe participation in warrant or guarantee in warrant or any heipation, or that of my lettice and Release, which which I, or my minor, revities. It was the time and the programs or at the creational programs or at the creational programs or at the creational programs or at the creation of whatever kind or release and forever dischedion of whatever kind or release and forever dischedion of whatever kind or the consideration damages arising or growing ance of this Release, Waiver of Liambership or enrollment is document and I certify the dies that would preclude set is my own and the information in INSURANCE CERTIFIC mandatory to participate	ities. It is the sole responsibility and cover and the consequences the consideration of the consequences the consideration of the consequences the consideration of the consequences the constitute and the consequences the constitute and cover of Liability and Li	consibility of each participate training. In the case of a activities. The undersigned activities are participated and assigned and activities are provided as a second activities. The participate activities are the Village of Evendale allegiant and activities. The participate activities are the Village of Evendale activities. The participate activities are the Village of Evendale activities. The participate activities are the Village of Evendale activities are the Village of Evendale activities. The participate activities are the Village of Evendale activities are the Village of Evendale activities. The participant activities are the Village activities are the Village activities and that I have read, under the participant activity (ies) and that I have read, under the participant activity (ies) and that I have read, under the participant activity (ies) and that I have read, under the participant activity (ies) and that I have read, under the participant activity (ies) and that I have read, under the participant activity (ies) and that I have read, under the participant activity (ies) and that I have read, under the participant activity (ies) and that I have read, under the participant activity (ies) and that I have read, under the participant activities.	cant to participate minor, their legal and acknowledged all condition of an injury or propertitional activities. Sume all risks and reparation for and trisk of physical owing me and minor, for our us Municipality, I and ents and Officials own, foreseen and resulting from male, its Employees ion in recreational ge of Evendale, its vereign or officials of the during the entire lage of Evendale der 18 years of against the aboverstand and signed LIABILITY AND res.
CONSENT AND RELEASE ON BI I verify that I am the parent a in the activity of the minor. I also certification and the release, waiver a	nd/or legal guardian of tl verify that I have read			
Signature		Dat	e	
Printed Name:				

Initials

2016_

Initials

Is all the above information correct and up to date? 2015_

2017 _

Initials