



2016-2017
Bloomingdale Park District
Preschool Adventures Registration and Waiver

\$5 per hour 6:45am-6:15pm 510704-A1

Child's Name: Date of Birth:

Address: (Street) (City)
1st Contact # 2nd Contact#

Current Preschool: Start Date: Code # Times Days Teacher

Visa/Mastercard/Discover

Cardholder's Name(Please print)

Card Number Exp Date 3 Digit Code

AUTHORIZED SIGNATURE

Please place a check on one of the following lines:

25 HOURS Total \$125
50 HOURS Total \$250
75 HOURS Total \$375
100 HOURS Total \$500
TOTAL FEE

- Busy Bees requires separate registration
• Must be registered for Once Upon A Time Preschool, or DuJardin, Erickson or Winnebago Early Childhood program.
• This is an hourly rate. No exceptions. Partial hours will be charged the full hour.
• The credit card provided will automatically be charged when punches are low
• All unused punches will be refunded at the end of the program
• If hours attended exceed punches within 2 weeks, participant will be charged the next level card.

REGISTRATION WAIVER & RELEASE

The Bloomingdale Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Bloomingdale Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participant's safety. However, participants and parents/guardians of minors registering for the above listed programs/activities must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

WARNING OF RISK

Recreational activities are intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity. Understandably, not all hazards and dangers can be foreseen. Depending on the particular activity, participants must understand that certain risks, dangers and injuries due to inclement weather, slip and falls, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and all other circumstances inherent to indoor and outdoor recreational activities exist. In this regard, it must be recognized that it is impossible for the Bloomingdale Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in the programs listed above, you will be expressly assuming the risk and liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with these programs (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in these programs against the Bloomingdale Park District, including its officials, agents, volunteers and employees.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my online or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Participant signature/parent or legal guardian signature

Date

Date Processed by Amt Pd Method of payment