

Registration Form Register online! cityofcalistoga.perfectmind.com

Participant Name (First, Last):		Birth Date:			
Address:	City:	State:	Zip Code:_		
Email:	Phone	»:	1	home or cell?	
Parent/Emergency Contact Name: Are there any allergies, health concerns or special need. No _Yes (please explain):	eds we should be aware of for your p				
Activity Name:	Youth Sports- Shirt/Jersey Size (circle	one): Youth or A	Adult / XS	S M L	XL
Registration Guidelines					
 To be removed from the program, without charge, participaths this time frame will result in a participation fee. To make any registration changes, participants must contaemailing (recreation@ci.calistoga.ca.us). I	act the Recreation Department by calling	(707)-942-2838 and spe	eaking with an em	ployee, leaving a	voicemail, or
Qualifying Free Programs					
If the program you are registering for is a free program offere School District limits, please read the following guidelines. Swim Lessons 1. Missing more than two classes will result in removal from the All other recreation programs 1. Failure to attend the first two scheduled activity dates with 2. Failure to attend at least 50% of the program will result in a have read the guidelines regarding free programs.	the program, and a \$20 participation fee to be the notice will result in removal from the participation fee to be charged to your	be charged to your according or or and a \$20 parts or account.	unt.	charged to your a	
Calistoga Resident Pool Season Pass 2020					
If you are registering for a pool season pass, please read the for a Li understand I must provide proof of Calistoga residency to 2. I understand the pass is only valid for rec swim, lap swim, a pool are not included in the season pass. 3. I understand that if I lose my season pass, I will be charged 4. I understand I must have my pass with me to enter the pool. I have read and understand the guideling the proof of Calistoga residency to a content of the pool of Calistoga residency to a content of Calistoga residency to a conte	pick up my pass. and water aerobics programs during the 202 \$10 for a replacement pass. If I do not have my pass, I agree to pay the	e daily admission fee or		_	l events at the
YOUTH (11-17YRS) Pool Season Pass 2020					
 All youth ages 11-17 must sign up for a youth season pass to need a pass. All youth must follow these rules: a. Follow all pool rules posted on the wall of the pool ab. No profanity or lewd acts c. Be respectful of the facility, other patrons, lifeguard. If the rules are broken, the member will be given a warning broken a third time, the member will be asked to leave, their 	and rules enforced by a lifeguard Is, and all other pool staff g. If the rules are broken again, the member	will be asked to sit out	of the pool for 10		
Youth's Signature		Date			
Release and Wavier of Liability, Assumption of	Risk, and Indemnity Agreemen	t			
understand the nature of the activities in which the participant will be participating and understand that the Activity involves risks and danger of severe and serious personal, he participant's actions or inactions, the actions or inactions of other participants in the susume all such risks and dangers, and all liability and responsibilities for any and all per HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREI VOLUNTEERS, INDEPENDENT CONTRACTORS, REPRESENTATIVES, SUCCIDAMAGES, CAUSES OF ACTION, SUITS, OR JUDGMENTS, OF ANY KIND) SU WHOLE OR IN PART, PARTICIPANT'S PARTICIPATION IN THE ACTIVITY, ITHAT IF, DESPITE THIS RELEASE, I, THE PARTICIPANT, OR ANYONE ON THE ACTIVITY, ITHAT IF, DESPITE THIS RELEASE, I, THE PARTICIPANT, OR ANYONE ON THE ACTIVITY ARD THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEYS HAVE CAREFULLY READ THIS FORM, RECOGNIZE THE POTENTIAL CONSEQUENCES, INCLUDING THAT I AM WAIVING CERTAIN RIGHTS A SIGNATURE FOR THIS TO BE A COMPLETE AND UNCONDITIONAL RELE understand and acknowledge that while participating in the Activity, pictures, includin surproses without any further written agreement or authorization. I authorize the use of elease the Releasees from all claims related to the taking and use of such pictures on the release the Releasees from all claims related to the taking and use of such pictures on the	physical and emotional injury, accident, illness, or even de he Activity, the conditions under which the Activity take toential risks, injuries, losses, costs and damages associate E TO INDEMNIFY, SAVE AND HOLD HARMLESS TESSORS AND ASSIGNS) FROM ANY AND ALL LISTAINED BY ME OR THE PARTICIPANT, CAUSED INCLUDING BUT NOT LIMITED TO, THE RELEASE EF PARTICIPANT'S BEHALF MAKES A CLAIM AGA'S' FEES, LOSSES, LIABILITY OR DAMAGES, OR AN DANGERS INCIDENT TO THE PARTICIPANT FAND ASSUMING RISKS. I ACKNOWLEDGE THA'EASE OF ALL LIABILITY. 10 10 10 10 10 10 10 10 10 10 10 10 10 1	eath, as well as loss of or dama, s place, or the negligence of o d with the participant's particip at The RELEASES (CITY GABILITY (CLAIMS, DEMA) OR ALLEGED TO BE CAUS LES OWN PASSIVE OR ACT INST ANY OF THE RELEASY OTHER COST THAT MAY CNGAGING IN THIS ACTIF I AM SIGNING THIS FOR I, and subsequently may be useg y voice, to be exhibited, as still	age to property and that to thers, including the Rel vantion in the Activity. OF CALISTOGA, ITS NDS, LOSSES, COST SED BY, ARISING OU' TIVE NEGLIGENCE O' SSEES, I WILL INDEM! Y OCCUR AS A RESUL VITY, AND FULLY U' RM FREELY AND VO' and by the City of Calistog	these risks and dangers leasees named below. OFFICERS, EMPLO'S, INCLUDING ATTO TOF, OR IN CONNEG OTHERWISE. I FUNIFY, SAVE AND HOLTOF SUCH A CLAIM UNDERSTAND ITS ODLUNTARILY AND I ga for program publicity ga for program publicity.	I fully accept and YEES, AGENTS, ORNEYS' FEES, TION WITH, IN JIKTHER AGREE DLD HARMLESS ML. CONTENT AND INTEND BY MY y and other lawful
Participant or Parent/Guardian's Signature (if participant is u	inder 18 years old)	Date			