

Mt. Zion Parks & Recreation Department Program Registration Form

Participants Name	Gender	Age (If applicable)	Grade (If applicable)	Class Name	Shirt Size (If applicable)	Fee
					Total	
Waiver & Release of A	II C I.:		ione of Biolo		Payments	
the participant in one of more of the Mt. Zion, including programs that a The enrollment is hereby acknowled Officers, Board Members, agents, a claimed to have been received by the Markey of the proceived by the Markey of the Markey of the proceived by the Markey of t	the following properties of the scheduled to the scheduled to the servants, and extremely a servants, and extremely servants, and extremely servants.	ograms. This waiv o meet on the pro ersigned hereby re mployees from an d, or the undersign	er will be in effect to perty of the Mt. Zideleases, acquits, and y and all actions, caned's minor child, a	Community Unit School District #3 (Schoor the duration of each program organized Community Unit School District #3. If forever waives and discharges the Villacuses of action, claims, demands, damages a result of participating in any Village of	zed and/or operated by age of Mt. Zion and Scho es, cost, expenses, and	the Village of ool District, its compensation
0 0	participant in t	the above-mention	ned program(s) ma	y be exposed to certain risks of injury. Trisigned as a result of participating in the		to be fully
	nd relinquish a	II claims the under	rsigned may have a	s a result of participating in the above-m		gainst the
	claims resulting	g from injuries, inc	cluding death, dama	of Mt. Zion and School District and its Cages, and losses sustained by the undersities of the program.		_
I have read and fully understan	nd the above v	waiver and relea	se of all claims.			
Signature (18 years or older or Parent/Guardian)					Date	
Email Address			Pho	ne Number		