



**Mt. Zion Parks & Recreation Department  
Program Registration Form**

Participant Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Grade/Age: \_\_\_\_\_

Programs: \_\_\_\_\_

Shirt Size: \_\_\_\_\_ Total Fees Paid: \_\_\_\_\_

Parent's  
Signature: \_\_\_\_\_

1. All participants of Mt. Zion Recreation Programs will be required to complete a registration form and liability waiver.
2. All participants must be registered by the deadline as space may be limited in the programs.
3. Full refunds will only be given in the event that a class is canceled by the Recreation Department. Refunds will be issued if the participant becomes ill or is injured prior to the start of the class or program. A doctor's excuse will be required. No refunds will be issued to participants once classes are completed. Requests for refunds due to extreme or unusual circumstances will be left to the discretion of the Director of Parks & Recreation. An administrative processing fee will be deducted from all refunds requested by participants. Please allow 30 days of issue of a refund.
4. Participants may be moved to different levels if the program instruction feels that he/she is performing above or below his/her ability.
5. Instructor and supervisors have the right to remove from any program, without a refund, any participant who is disruptive, violent, or under the influence of alcohol or drugs.
6. Evaluations may be requested from participants for the program he/she is participating in. This will enable the Department to determine whether to offer the class again, use the same instructor, make changes or improvements, and will provide support for the program in case of a refund.

Village of Mt. Zion  
Waiver and Release of all Claims

This waiver and release of al claims is provided to the Village of Mt. Zion in consideration of enrolling the Participant in one or more of the following programs. This waiver will be in effect for the duration of each program, which the Participant has enrolled. The Participant has enrolled in the following program(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The enrollment is hereby acknowledged; the undersigned hereby releases, acquits, and forever waives and discharges the Village of Mt. Zion, its officers, agents, servants, and employees from any and all actions, causes of action, claims, demands, damages, cost, expenses, and compensation claimed to have been received by the undersigned, or the undersigned’s minor child, as a result of participating in the above-mentioned Village of Mt. Zion program.

The undersigned recognized that a participant in the above-mentioned program(s) may be exposed to certain risks of injury. The undersigned agrees to be fully responsible for all injuries, including death, and financial losses, sustained by the undersigned as a result of participating in the above program(s).

The undersigned agrees to waive and relinquish all claims the undersigned may have as a result of participating in the above-mentioned program(s) against the Village of Mt. Zion and its officers, agents, servants, and employees.

The undersigned further agrees to indemnify and hold harmless and defend the Village of Mt. Zion and its officers, agents, servants, and employees from any claims resulting from injuries, including death, damages, and losses sustained by the undersigned and/or the undersigned’s dependents that arise out of, in connection with or in any way associated with the activities of the program.

**I HAVE READ AND FULLY UNDERSTAND THE ABOVE WAIVER AND RELEASE ALL CLAIMS.**

\_\_\_\_\_  
Participant

\_\_\_\_\_  
Parent of Participant (if Minor)

\_\_\_\_\_  
Date