HAMPSHIRE TOWNSHIP PARK DISTRICT *Registration Form*

Little People Playtime

441 East Jefferson Avenue, Hampshire, IL 60140 • FAX 847-683-4256

Primary Guardian	Secondary Guardian
First Last	First Last
Address PO Box	Address PO Box
City State Zip	City State Zip
Home Phone	Home Phone
Work Phone Extension	Work Phone Extension
Cell Phone	Cell Phone

Additional Information

☐ Hampshire Township Resident ☐ Non-Resident ☐ Preschool (Ashley Freer) ☐ Day Care (Contact Rocio Peralta)

Email Address (please make sure this is up to date as the vast amount of our communication is relayed through email):

Emergency Contact Relation Phone

Sign the Waiver

Please read the Waiver and Release on the reverse side of this form. I have read and fully understand the important warning of risk, assumption of risk and waiver and release of all claims on the reverse side of this form.

_____ _____

Signature (guardian's signature required if participant is under 18) **Date**

Participant (include last name if different)	Birth Date			Age	Activity #	Activity Name	Fee
1)							
2nd choice:							
2)							
2nd choice:							

☐ I would like to make a donation to the Hampshire Township Park District Playground Fund
Circle donation amount and add to Fee Total: $5 $10 $15 $20 other amount $

Fee Total

Please describe any accommodations needed to have a successful inclusion in to the programs:

List any medical conditions:

Needed to register for Little People Playtime Preschool/ Day Care

- Non-refundable family registration fee $125.00
- Copy of child's birth certificate
- Current medical record (no more than 6 months prior to start of classes) using the state of Illinois Certificate of Health Examination form. Immunizations must include TB test and lead assessments and physician's signature.
- Completed Park District registration forms & signed waiver
- DCFS forms found on hampshireparkdistrict.org

Payment Options

☐ Cash / Amount $ ☐ Check # / Amount $

MasterCard/VISA/Discover Amount of Charge $_____

Card #___ ___ ___ ___ | ___ ___ ___ ___ | ___ ___ ___ ___ | ___ ___ ___ ___ Expiration Date ___ ___ | ___ ___ V-Code ___ ___ ___

Cardholder Name Authorized Signature

REGISTRATION FORM
Waiver & Release

The Hampshire Township 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 Hampshire Township Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program/activity 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 adequately skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or has recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

I acknowledge and agree that photographs and/or video recordings of my child may be taken and used by the Park District for promotional, advertising, and marketing purposes, including but not limited to print and digital media. I understand that no compensation will be provided for such use.

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. All hazards and dangers cannot be foreseen. Depending on the particular activity, certain risks, dangers and injuries may exist due to inclement weather, slips and falls, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and other risks inherent to the particular activity. In this regard, it is impossible for the Hampshire Township Park District to guarantee absolute safety.

Waiver and Release of all Claims and Assumptions of Risk
Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal 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 this program/activity (including transportation services and vehicle operations, when provided).
I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, 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 this program/activity against the Hampshire Township 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 on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Participant's Name (print): _____

Date: _____

Participant's Signature: _____
(18 years or older or Parent/Guardian)

PARTICIPATION WILL BE DENIED
If the signature of adult participant or parent/guardian and date are not on this waiver.