



RECREATION PROGRAM REGISTRATION FORM

Aquatics Center: 987 Ave. Vista Hermosa, San Clemente, CA 92673 / (949) 429-8797

Community Center: 100 N. Calle Seville, San Clemente, CA 92672 / (949) 361-8264

Ole Hanson Beach Club: 105 W. Avenida Pico, San Clemente, CA 92672 / (949) 388-2131

Adult Last Name:	First Name:	
Street Address:		
City:	State:	Zip Code:
Primary Phone:	Alternate Phone:	
E-Mail Address:		

Barcode	Class/Program	Participant's Name	Gender	DOB (under 18)	Fee
Non-resident fee (\$3/class)					\$
Donate to Recreation Scholarships?					\$
Check #:				Total Fee:	\$

PHOTO/VIDEO RELEASE: I understand that at various times City representatives may photograph and/or video activities of City recreation programs, special events and participants. By signing this form, I authorize the City of San Clemente to use or publish any photographs/videos taken of me or my child/children to promote classes on the City's website and other internet publicity, and/or in future publications of City brochures and/or flyers.

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT: The undersigned hereby releases the City of San Clemente and its officers, agents and employees from all liability to the undersigned (and from any minor participants for whom the undersigned has the capacity to contract), thereby releasing, indemnifying, and holding harmless the City of San Clemente, its officers, agents, and employees from all liability to the undersigned (and said minors) for any loss or damage on account of physical, mental and emotional injury to the undersigned (of said minors) caused by negligence of the City of San Clemente, its officers, agents and employees. The undersigned hereby assumes full responsibility for, and the risk of, physical, mental and emotional injury due to the negligence of the City of San Clemente, its officers, agents and employees. The undersigned recognizes for himself or herself, and any minors, that the events and occurrences to which this release applies can be dangerous and as a result of signing below, the undersigned is accepting those risks for himself or herself, and for any minor participants for whom the undersigned can contract.

VIRTUAL/ONLINE RELEASE: I fully understand that my participation in the City of San Clemente (hereinafter "event/class") exposes me to the risk of personal injury, death, communicable diseases, illnesses, viruses, or property damage. I hereby acknowledge that I am voluntarily participating in this event/class and agree to assume any such risks. The City of San Clemente and its officers, agents and employees is not responsible for any loss, alteration, corruption or other damage to my personal property, including computers, networks and other personal property used as part of my participation in the event/class. The City of San Clemente and its officers, agents and employees makes no warranty that 1) internet service will be adequate to facilitate the event/class, 2) internet service will be uninterrupted, timely, secure, error-free or virus-free, 3) any information that may be obtained through the event/class will be accurate or reliable and/or 4) that any errors in software will be corrected. I understand and agree that any material downloaded, viewed or otherwise obtained through the event/class is done at my own risk and I will be solely responsible for any loss or damage to my personal property, including computer systems and networks, or loss of data that results from the use, download and/or viewing of the event/class. I hereby warrant and agree, that the conditions of my property, both personal and real, are suitable for participation in the event/class and that by participating in the event/class, I assume the risk that such property is not suitable and agree to hold the City of San Clemente and its officers, agents and employees harmless from any loss or damage arising from injury to person or property arising from the use of such property in the event/class. I hereby release, discharge and agree not to sue the City of San Clemente and its officers, agents and employees for any injury, death or damage to or loss of personal property arising out of, or in connection with, my participation in the event/class from whatever cause, including the active or passive negligence of the City of San Clemente and its officers, agents and employees or any other participants in the event/class. The parties to this AGREEMENT understand that this document is not intended to release any party from any act or omission of "gross negligence," as that term is used in applicable case law and/or statutory provision. In consideration for being permitted to participate in the event /class, I hereby agree, for myself, my heirs, administrators, executors and assigns, that I shall indemnify and hold harmless the City of San Clemente and its officers, agents and employees from any and all claims, demands actions or suits arising out of or in connection with my participation in the event/class.

I understand and agree that the event/class may be recorded for viewing and/or listening by others at a future date. I consent to the City of San Clemente and its officers, agents and employees use of audio/video recordings of me during the event/class and that the City of San Clemente and its officers, agents and employees may use audio/video segments or photograph stills of me for any purpose, including but not limited to news, advertising and promotional purposes, without compensation to me. I hereby release and hold harmless the City of San Clemente and its officers, agents and employees from any claims relating to the use of my likeness and image. I understand and agree that this is an interactive event/class and agree to act reasonably and professionally at all times during my participation. During live sessions, participants will be able to see and hear anything within audio or camera viewing areas. Accordingly, the event/class coordinator may, in his or her sole discretion, mute and/or restrict video access to participants during the session. Where the participant in the event/class is a minor, the parent or legal guardian must monitor the session to ensure the minor is abiding by these and any other rules and regulations established by the event/class coordinator.

REFUND POLICY: To drop a class, complete a Refund Request Form. If notification is received before the second class meeting date, a refund in the form of a check or left on the City account (minus an \$8 processing fee) will be processed. **Camps:** If a refund request is received 72-hours before the start of the course/camp, a refund will be provided. **Workshops:** If a refund request is received 24-hours before the start of the course, a refund will be provided. All refunds are in the form a check or credit. An \$8.00 refund processing fee will apply per person, per class. **No refunds or credits will be issued after the second class meeting.**

I, THE UNDERSIGNED, AM FAMILIAR WITH THE NATURE OF ACTIVITIES AND CERTIFY THAT I HAVE READ AND UNDERSTAND THIS WAIVER AND RELEASE AS IT APPLIES TO MYSELF AND TO ANY MINORS FOR WHOM I AM SIGNING.

Participant Signature: _____ **Date:** _____

(Parent or guardian signature if under 18 years of age)