

# SOUTH PORTLAND PARKS, RECREATION & WATERFRONT PROGRAM REGISTRATION FORM



## **PARTICIPANT INFORMATION**

Participants Name: \_\_\_\_\_ D.O.B: \_\_\_\_\_ Grade (youth only): \_\_\_\_\_ Gender: \_\_\_\_\_

Participants Name: \_\_\_\_\_ D.O.B: \_\_\_\_\_ Grade (youth only): \_\_\_\_\_ Gender: \_\_\_\_\_

Parent/Guardian Name (if participant is under 18): \_\_\_\_\_ D.O.B: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Participant Medical Concerns/Medications/Limitations: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship to Participant: \_\_\_\_\_

## **PROGRAM(S) REGISTERING FOR:**

| Participant Name (s) | Program Name (please be specific) | T-shirt size (if applicable) | Fee   |
|----------------------|-----------------------------------|------------------------------|-------|
| _____                | _____                             | _____                        | _____ |
| _____                | _____                             | _____                        | _____ |
| _____                | _____                             | _____                        | _____ |
| _____                | _____                             | _____                        | _____ |
| Total Due            |                                   |                              | _____ |

### **Participant Release/Assumption of Risk Agreement/Agreement to Indemnify & Hold Harmless**

Each person signing below understands that participation in the City of South Portland ("City") program, activity and/or special event can involve the risk of damage, illness (including communicable diseases such as MRSA, influenza and COVID-19), and injury, including permanent disability and death, to both people and property, and while particular rules, equipment and personal discipline may reduce these risks, the risks do exist.

Each person signing below understands and agrees that the City, its agents, officers and employees, accept no responsibility, and will not be liable, for any injury, illness, harm or damage to his/her person or property (including, but not limited to, injury, illness, harm or damage caused by negligence of the City, its agents, officers or employees) occurring during or arising out of participation in any City program, activity and/or special event.

To the fullest extent permitted by law, each person signing below agrees to assume all risk of injury, illness, harm or damage to his/her person or property arising during or in connection with said City program, activity and/or special event.

Each person signing below hereby releases and agrees to indemnify and hold harmless the City, its agents, officers and employees, from any and all liability, actions, damages and claims of any kind and nature whatsoever for any injury, illness, harm or damage to his/her person or property (including, but not limited to, injury, illness, harm or damage caused by negligence of the City, its agents, officers or employees) that may arise or occur during or in connection with said program, activity and/or special event.

Each person signing below hereby grants the City consent to record, videotape and photograph his/her or their child's image and/or voice (collectively "digital media") to be used with or without his/her or their name (s) and for any lawful purpose, including, for example, such purposes as publicity, illustration, advertising, and web-based publications, all without compensation.

Parent/Guardian or Adult Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please make checks payable to the City of South Portland

Please mail or drop off form with payment to:

South Portland Community Center

21 Nelson Road, South Portland ME, 04106

Question? Please call 207-767-7650

[www.sopoparksrec.com](http://www.sopoparksrec.com)