



# General Registration Application

## Wheeling Park District Waiver and Release of all Claims

Please sign the waiver on the next page and return to the Wheeling Park District with payment.

Last Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

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

**Please complete the following for youth programs:**

Father's Name: \_\_\_\_\_

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

Mother's Name: \_\_\_\_\_

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

Emergency Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell: \_\_\_\_\_

Code Number	Program Name	Start Date	Start Time	Fee	Participant First & Last Name	Sex	Birthday Mo/Day/Yr	Grade	Office Use Only

**I would like to make a donation to the Wheeling Park District Scholarship Fund**  
 Amount: \$ \_\_\_\_\_

Wheeling Park District  
 333 West Dundee Road  
 Wheeling, IL 60090  
**(847) 465-3333**

**Method of Payment**     Cash     Check     MasterCard     Visa     Discover

Receipt #: \_\_\_\_\_      Credit Card #: \_\_\_\_\_      Exp Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Please note: \$6 Service Charge for any check returned from the bank.**

For Infant/Toddler & Early Childhood programs: Is birth certificate on file?     Yes     No

Wheeling Park District welcomes individuals with disabilities. Please describe any accommodations needed for successful inclusion into program(s):

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**This waiver must be signed in order to register.**

## **WHEELING PARK DISTRICT WAIVER & RELEASE OF ALL CLAIMS**

### **IMPORTANT INFORMATION**

The Wheeling 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 Wheeling 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 the below listed programs/activities 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 skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

When using the Wheeling Park District indoor and outdoor aquatic facilities please understand and recognize that lifeguards are not responsible for providing supervision or assessing your swimming skills or that of your minor child; rather, lifeguards are responsible for enforcing safety rules and responding to emergencies. Adult pool pass holders and parents of minor pool pass holders are solely responsible for supervision of any and all activities when using these facilities. Therefore, the Wheeling Park District requires that children under 10 year of age must be supervised at all times by a responsible person, 17 years of age or older.

### **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. Understandably, not all hazards and dangers can be foreseen. Depending on the particular activity, participants must understand that certain risks, dangers and injuries due to inclement weather, slip and falls, overexertion and fatigue, ignoring safety rules and instructions, collision with stationary objects or other participants, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and all other

circumstances inherent to indoor and outdoor recreational activities exist. In this regard, it must be recognized that it is impossible for the Wheeling Park District to guarantee absolute safety.

Dependent upon a person's physical condition, age and/or skill level, aerobics and fitness activities can involve a substantial risk of the following types of injuries. This list is by no means complete, but includes some of the more common ones:

1. Heart attack, stroke and circulatory problems
2. Bone and joint injuries
3. Back and neck injury
4. Shin splints
5. Muscle strain and other muscle injuries
6. Foot problems

Swimming and other aquatic activities challenge and engage the physical, mental and emotional resources of each participant. However, despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury, including but not limited to drowning, head/brain injury, and spinal cord injury

### **WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK**

Please read this form carefully and be aware that in signing up and participating in the programs listed below, 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 these programs (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs, 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 these programs/activities against the Wheeling 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 my on-line acceptance of this waiver shall substitute for and have the same legal effect as a waiver form signature. Participation will be denied if the signature of adult participant or parent/guardian and date are not on this waiver or the waiver is rejected on-line.**

Date: \_\_\_\_\_

[Please Print] Participant's Name: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

(18 years or older, or Parent/Guardian)