



# RecKids Enrollment Form

Pre-Paid Youth Enrichment Program

@ The Lincoln City Community Center (541) 364-1171

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

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

1st Contact-Guardian/Parent Name & Phone # \_\_\_\_\_

2<sup>nd</sup> Contact-Guardian/Parent Name & Phone# \_\_\_\_\_

Doctor \_\_\_\_\_ Phone # \_\_\_\_\_

Can your child swim? Yes \_\_\_\_\_ No \_\_\_\_\_ School Attending: \_\_\_\_\_

Is the child on medication? Yes \_\_\_\_\_ No \_\_\_\_\_; If so, what kind? \_\_\_\_\_

Does your child have any special needs? e.g. ADA, ADHD, Behavior \_\_\_\_\_

Does the child have allergies? No \_\_\_\_\_ Yes \_\_\_\_\_ To What? \_\_\_\_\_

Will anyone but Guardian/Parent be picking your child up? No \_\_\_\_\_ Yes \_\_\_\_\_ Contact in Emergency?

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Date Received \_\_\_\_\_ Staff Initials \_\_\_\_\_

# Lincoln City Parks & Recreation Assumption of Risk Release and Waiver of Liability

- I. Assumption of Risk: Thank you for your cautious and thoughtful participation in Lincoln Parks & Recreation programs (LCP&R) and use of our equipment. It is important that you are aware that participation in recreational activities and athletic programs sponsored by the LCP&R may involve substantial risk of bodily or personal injury or other physical dangers. Please review this document carefully and sign below to acknowledge and agree to the following:
- I intend to permit my child(ren) to voluntarily participate in an exercise, sports, or recreation program offered through the LCP&R.
  - I am aware that participation in such activities may involve inherent risks of physical injury such as bruises, broken bones, strains/sprains, concussion and heart-related conditions.
  - I am accepting and assuming all risks, hazards and dangers involved in any such activities in which my child(ren) participate.
  - I acknowledge that I am solely responsible for any hospital or other costs arising out of any bodily injury sustained through my child(ren)'s participation in these voluntary athletic or recreational activities.
- II. Release/Waiver of Liability: By my signature below I also agree on my child(ren)'s behalf as well as his/her/their heirs, executors, administrator and assigns, that in exchange for the consideration of the enrichment my child(ren) expect to gain from such participation in the exercise, sports and/or recreation programs and for the LCP&R allowing such participation to waive, release, and hold harmless, covenant not to sue and forever discharge the City of Lincoln City, its employees, volunteers and elected officials from any and all claims, demands, rights, causes of action, judgments, costs or any other liability of any kind resulting from my child(ren)'s participation in such activities and programs, including all known or unknown and foreseen or unforeseen bodily or personal injuries.
- III. Information and Request for Assistance: The facilities and programs offered by the LCP&R have been designed and established to provide the optimum level of beneficial activity and enjoyment without compromising the health and safety of those who use them. However, due to the nature of the programs, activities and equipment made available by the LCP&R, there is an inherent risk. This results in a practical limitation on the LCP&R in its effort to prevent bodily and personal injury.
- IV. Photo Policy: Lincoln City Parks & Recreation (LCP&R) reserves the right to photograph classes, programs, and participants at any of our facilities and properties or any sponsored activity. Please be aware that these photos are for promotional purposes and may be used in future publications and media communications in any format. If you do not wish to be photographed, please inform staff and we will make reasonable efforts to honor your request. If you see staff taking pictures, and you do not wish to be photographed, please let us know. If you see a photo of yourself or a family member that causes you concern, please notify us. As a courtesy, we will make every reasonable effort to dispose of the image, and will not use it in future publications. However, we will not be able to retrieve, destroy or discontinue existing printed publications in which the photograph may have been included.
- V. Financial Policy: Individuals must be preregistered with payment received before 5 PM the day prior to the start of any Parks & Recreation program.
- VI. Refund Policy: Refunds or credits are granted if we are notified **at least 24 hours in advance to receive credit**. Program fees are not refunded/prorated for participants who miss portions of programs.
- VII. Inclement Weather Policy:  
If Lincoln County Public Schools has **LATE OPENINGS**, we will continue with the regularly scheduled RecKids programs. If Lincoln County Public Schools **CLOSE** for inclement weather, ALL RecKids programs are cancelled ALL DAY. If inclement weather occurs later in the day, for safety purposes it is the discretion of the Recreation Supervisor to close the RecKids program early. This will be noted on our FB page, or please call 541-994-2131, Option #1. If inclement weather falls on the weekend or non-school day, please call 541-994-2131, Option #1 for the most up-to-date information.  
Refunds are not given due to inclement weather.

Printed Name(s) of Participant(s) \_\_\_\_\_

Printed Name Parent/Legal Guardian \_\_\_\_\_

Signature of Participant(s) Parent/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

Signature of Recreation Coordinator: \_\_\_\_\_ Date \_\_\_\_\_