



# Cordova Recreation & Park District Registration Form

Participant/guardian must read and fill out the form in its entirety prior to the start of the activity/class.  
If the waiver is not signed, participant will not be registered, and form will be returned.  
Make checks payable to "CRPD" and submit form with payment to:

**Cordova Golf Course • 9425 Jackson Road, Sacramento, CA 95826 • 916-362-1196**

Payer's Name \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone (Primary) \_\_\_\_\_ Phone (Secondary) \_\_\_\_\_  
 Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_  
 E-Mail \_\_\_\_\_

Participant Full Name	DOB	Gender	Activity/Class	Date(s)	Location	Fee(s)	
<input type="checkbox"/> I'd like to donate \$ _____ to the Fee Assistance Program to help a child participate in CRPD programs!						<b>Total</b>	\$

**AGREEMENT, WAIVER & RELEASE:**

In consideration for being permitted by the Cordova Recreation & Park District to participate in the above-referenced activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the District (including its officers, employees, volunteers, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of active or passive negligence or carelessness on the part of the persons or entities mentioned above.

It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs, administrators, executors, and assigns and that I shall indemnify and hold the Cordova Recreation & Park District (including its officers, employees, volunteers, and agents) free and harmless from any loss, liability, damage, cost, or expense which may arise out of or connected in any way with my participation in said activity.

Additionally, I fully understand that my participation in the above-referenced activity exposes me to the risk of personal injury, death, communicable diseases, illnesses, viruses, and/or property damage. I hereby acknowledge that I am voluntarily participating in this activity and agree to assume any such risks.

**VIRTUAL CLASS RELEASE:** I hereby warrant and agree, that the conditions of my environment are safe, free from obstructions, and are suitable for participation in the above-referenced activity. I further understand and agree that any material downloaded, viewed or otherwise obtained through my participation in said activity is done at my own risk and the District is not responsible for any loss, alteration, corruption or other damage to my personal property, including computers, networks and other property used as part of my participation.

**PHOTOGRAPHIC RELEASE:** I understand that photographs may be taken during this activity and hereby grant the District permission to use any such photo(s) for advertising or in promotional materials.

**PARENTAL/GUARDIAN CONSENT:** (to be completed and signed by parent/guardian if Participant is under 18 years of age.)  
 I hereby consent that the participant listed above, \_\_\_\_\_ (name) participate in the above-referenced activity, and I hereby execute the above Agreement, Waiver, and Release on their behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the District (including its officers, employees, volunteers, and agents) free and harmless from any loss, liability, damage, cost, or expense which may arise out of or connected in any way with said minor's participation in said activity.

**I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, & RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT AND I SIGN IT OF MY FREE WILL.**

Signature of Participant (or Parent/Guardian) \_\_\_\_\_ Date \_\_\_\_\_  
 Name (Print) \_\_\_\_\_

<b>Payment Type</b>	<input type="radio"/> Cash	<input type="radio"/> Check #	Credit Card #	3-Digit #	Exp
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