Enrichment Program Registration Form - FALL 2016

Complete the registration form after reading the Refund Policy on page 14. FAQ on page 3.

			Sec	ction A				
Participant's Last Name		Home Phone Num	Home Phone Number					
Address				Work Phone Num	Work Phone Number			
City and Zip Code				Cell Phone Number				
School Child Attends				E-mail Address	E-mail Address			
Emergency Contact				Emergency Numb	Emergency Number			
			Sec	tion B				
Participant's First Name	Date of Birth	Gender	Grade Level	Activity Title	Code 1st Choice	Code 2nd Choice	Activity Fee	
In consideration for the acceptance of Cupertino Recreation and Communit County of Santa Clara, their agents a ORPROPERTY DAMAGE THAT MENTIONED EVENT, EVEN THO OR ENTITIES MENTIONED ABOUT FRAUDU. Furthermore, I assume all responsibil or myself, which may have been caus does not guarantee the construction, agree to allow use of my/our photographics.	by Services Depaind employees F MAY HAVE AR DUGH THAT LL DVE AND HERI JLENT OR INTI ity and agree to ited by negligence condition, or safe aph for program	rtment, the C ROM AND A ISEN OUT C ABILITY MA EIN RELEAS ENTIONAL A ndemnify the et, or any act, of the faci publicity. I H	upertino Union AGAINST ANY DF, OR IN ANY AY HAVE ARIS BED, BUT DO N ACTS OR FOR City of Cupert of any person co lities or the equ IAVE READ TI	School District, the Cupertin AND ALL LIABILITY FOR WAY CONNECTED WITH EN OUT OF NEGLIGENCHOT RELEASE THE ABOVE THEIR NEGLIGENT VIOIS into and the Cupertino Union connected in any way with the ipment and that this Release	no Public Facilities R ANY LOSS, PEF I, MY PARTICIPA E OR CARELESSI E MENTIONED I LATIONS OF STA School District for a forementioned e Agreement is to be D ITS MEANING	Corporation, the Ci RSONAL INJURY, I TION OR PRESEN NESS ON THE PAR PERSONS OR ENT TUTORY LAW. r any loss, damage of vent. I understand the binding on heirs, n AND VOLUNTARI	ty of Cupertino and the NCLUDING DEATH, CE AT THE AFORE-RT OF THE PERSONS ITIES FROM THEIR or injury to my property, at the City of Cupertinony assigns and me. I/we	
Date				Signature of Parent	or Legal Guar	dian		
				Refund Check Paya	ble To			
			Sec	ction D				
Payment by: ☐ Cash ☐ Chec			able to: City o					
	iercara DA				Date	CV	C#	
Name as it appears on Card								
Authorized Signature					Au	thorized Amount	\$	

Include these required items with your registration or your registration cannot be processed:

1. Payment 2. Signature, Section C 3. Signature, Section D for credit cards