

Afterschool Enrichment Program Registration Form

Complete the registration form after reading the Refund Policy and FAQ

Section A

Participant's Last Name	Home Phone Number
Address	Work Phone Number
City and Zip Code	Cell Phone Number
School Child Attends	E-mail Address
Emergency Contact	Emergency Number

Section B

Participant's First Name	Date of Birth	Gender	Grade Level	Activity Title	Code 1st Choice	Code 2nd Choice	Activity Fee

Section C

I understand that my participation in the event or class exposes me to the risk of personal injury, death, or property damage. I hereby acknowledge that I am voluntarily participating in this event or class and I agree to assume such risks, including risk of personal injury, death, or damage to property. In consideration of acceptance of my application to participate in the event or class for which I am participating, I hereby RELEASE, DISCHARGE, AND AGREE NOT TO SUE, the City of Cupertino, the Cupertino Union School District, the Cupertino Public Facilities Corporation, the County of Santa Clara, the Fremont Union High School District, or any of their employees, contractors, volunteers, or agents ("collectively, City") to the fullest extent legally possible from any injury, death, or damage or loss to personal property arising out of, or in connection with, my participation in the event/class from whatever cause, including the active or passive negligence of City or any other participants in the event or class. I understand that City does not guarantee the construction, condition, or safety of the facilities where the event or class is taking place.

In consideration for being permitted to participate in the event or class, I hereby agree, for myself, my heirs, administrators, executors, and assigns, that I shall indemnify, defend and hold harmless City from any and all claims, demands, actions or suits arising out of or in connection with my participation in the event or class. I further allow my photograph to be taken and used for City purposes without compensation. I HAVE CAREFULLY READ THIS RELEASE, HOLD HARMLESS, AND AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT IT IS A FULL RELEASE OF ALL LIABILITY AND SIGN IT OF MY OWN FREE WILL.

IF PARTICIPANT IS UNDER 18: I AM THE PARENT OR GUARDIAN OF THE STUDENT ENROLLED IN THIS EVENT OR CLASS AND HAVE EXECUTED THIS RELEASE, HOLD HARMLESS, AND AGREEMENT NOT TO SUE. I HAVE THE LEGAL CAPACITY TO SIGN AND ACT ON BEHALF OF THE STUDENT, AND AGREE TO BIND MYSELF, THE STUDENT, HEIRS, ADMINISTRATORS, AND ASSIGNS TO ITS TERMS.

_____ Date

_____ Signature of Parent or Legal Guardian

_____ Refund Check Payable To

Section D

Payment by: Cash Check - Make your check payable to: City of Cupertino
 Visa MasterCard American Express Discover

Credit Card Number _____ Expiration Date _____ CVC# _____

Name as it appears on Card _____

Authorized Signature _____ Authorized 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