

ACTIVITY REGISTRATION FORM

Cupertino Parks and Recreation Department

10185 N. Stelling Road * Cupertino, CA 95014 * (408) 777-3120

CUPERTINO

PARENT / LEGAL GUARDIAN INI	FORMATION (Ple	ease Print)				
First Name () Main Phone		Last Name // Gender: O M O F Date of Birth (mm/dd/yy)				
New or Updated Information			/Unit City Zip Code Unit City			
Home Address						
() Work Phone	() Cell Phone					
Email						
Emergency Contact (First & Last Name)		((Phone)			

LIABILITY WAIVER & PHOTO RELEASE

WAIVER, RELEASE, HOLD HARMLESS AND AGREEMENT NOT TO SUE

I desire to participate in this PROGRAM, ACTIVITY, EVENT, MEMBERSHIP, OR CLASS (hereinafter, ACTIVITY). In consideration of the City of Cupertino accepting my application, participation, or entry into this ACTIVITY, I agree to release, waive, and discharge any and all claims for damages, death, personal injury, or property damage which I may have, or which hereafter accrue to me, against the City as a result of my participation in the ACTIVITY. This release is intended to discharge the City, its City Council, boards and commissions, officers, agents, employees, servants and volunteers, any other involved municipality or public agency (hereinafter, Indemnitees) from and against any and all liability arising out of or connected in any way with my participation in the ACTIVITY, even though that liability may arise out of the negligence or carelessness of other participants or the active or passive negligence of Indemnitees.

I further understand that accidents and injuries can result from the ACTIVITY; knowing the risks, nevertheless, I agree to assume those risks, and to release and hold harmless the Indemnitees who (through negligence or carelessness) might otherwise be liable to me (or my heirs or assigns) for damages.

In consideration for being permitted to participate in the ACTIVITY, I agree for myself, my heirs, administrators, executors, and assigns not to sue the City or any of the Indemnitees for any injury, death, damage, or loss of personal property that may arise out of, or in connection with, my participation in the ACTIVITY from whatever cause, including the active or passive negligence of the City or other participants, except for the sole negligence or willful misconduct of the City. Should a third party make a charge or claim against the City, I agree to indemnify, defend, and hold harmless the City from any and all claims, demands, actions or suits, and any other legal, administrative or regulatory proceeding arising out of, or in connection with, my participation in the ACTIVITY.

I understand this agreement and the promises contained herein are binding on myself and my heirs, administrators, executors and assigns, and shall be interpreted as broad and inclusive as allowed by law. If a court of competent jurisdiction declares any portion of this agreement invalid, the remainder of the agreement shall continue in full force and effect. I further allow my photograph to be taken and used for City purposes without compensation.

I have carefully read this agreement and fully understand its contents. I am aware that it is a full release of all liability and sign it on my own free will.

PARTICIPANT SIGNATURE	DATE	
(Parent / Legal Guardian if under 18)		

ACTIVITY INFORMATION / PAYMENT

Please check this box if you have any special needs requiring accommodations for the participant.

Participant Name (First & Last)	Birthdate (mm/dd/yy)	M/F	Grade	Activity Title		Code Ist Choice	Code 2nd Choice	Fee
/ -							<u>^</u>	
(To enter additional activities us	e back page)					TOTAL DUE	\$	
(Only fill out	for Mail-in, Fax-in	or if Ca	ardholde	r not present)		Options:		Ň
CREDIT CARD PAYMENT: (check one)	Credit Card Checks- Payable to "CITY OF CUPERTINO" (Overdraft fee charged for returned checks) Coverdraft fee charged for returned checks)						hecks)	
Card Number:	• Cash- Exact amount required (DO NOT							
Cardholder Name:					• Walk		o Recreation (Office:
Authorized Amount: \$	Signature:)	Cı	185 N. Stelling pertino, CA 9 to (408) 777-	5014	,