



CUPERTINO

Type of Payment: _____

City of Cupertino Parks and Recreation Department

Creating a Positive, Healthy, and Connected Community

2020

New Member Application

Annual Membership Fee: \$28.00
Cupertino Resident Fee: \$23.00

FOR OFFICE USE
Member # _____

Last Name 姓: _____ First Name 名: _____ Birthday 生日: _____

Address 地址: _____ City 城市: _____ Zip 郵區代號: _____

Phone (home) 電話: _____ (cell) 手機: _____ (work): _____

Email Address: _____ Male 男 Female 女

Acknowledgement of Receipt of Parking Permit 我收到了停車證
_____ Member Initials 請簽姓名起手字母 _____ Volunteer Initials

City of Cupertino ~ 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.

Signature of Participant 會員簽名 Date 日期

(Please complete information on other side)

Emergency Contact 緊急聯絡人: _____

Phone 電話: _____

Alternate Phone: _____

HEALTH INFORMATION

Having your health history information on file may help you receive fast, accurate care in case of an emergency.

Doctor or Clinic Name: _____ Phone: _____

• Any medication (s) that must be administered in case of emergency? No Yes What? _____

• Do you carry it on your person? No Yes Where? _____

• Food and medical allergies? Please list: _____

• Health issues: _____

• Medications: _____

• Special Accommodations: _____

ACTIVE SENIOR NEWS PUBLICATION 耆英通訊 雙月刊

Please send my newsletter by:

US MAIL Only 郵寄到家

EMAIL Only 電子郵寄 Email address 電子郵寄地址: _____

BOTH EMAIL and US MAIL 郵寄和上網- Email address 電子郵寄地址: _____

NO NEWSLETTER 不要耆英通訊 雙月刊 (Office use only: Code)

**Cupertino Senior Center
21251 Stevens Creek Blvd, Cupertino, CA 95014
Phone: (408) 777-3150 Fax: (408) 777-3156
www.cupertino.org/senior**