

GLENCOE PARK DISTRICT REGISTRATION FORM

Register by: 1. Walk-in or Drop-off 2. Mail 3. Fax (847) 835-7279 4. Online at www.glencoeParkDistrict.com

PLEASE PRINT

Family (Payor's) Last Name: _____ First (Payor's) Name: _____

Address: _____ Home Phone #: (____) _____

City _____ Zip Code _____ Work/Cell Phone #: (____) _____

Emergency Contact: _____ Emergency Phone: (____) _____

Email(Required): _____

Program ID#	Program Name	Fee	Registrant's Name (Last Name, First Name)	Sex M/F	Grade	Date of Birth	Birth Cert	OFFICE USE ONLY
1st		\$						
2nd								
1st		\$						
2nd								
1st		\$						
2nd								

Program ID#	If you would like to make a donation to the Community Access to Recreation for Everyone Scholarship Fund (C.A.R.E.), please check off the desired amount.	Donation Amount	Donor Name	OFFICE USE ONLY
9000-9		<input type="checkbox"/> \$10 <input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 Other \$ _____		

INDICATE YOUR CHOICE OF PAYMENT: Check # _____ \$ _____ Cash \$ _____ Credit Card \$ _____

Credit Card Information: Visa MasterCard Billing Address, if different _____ Expiration Date ____/____ (3-digit) V. Code _____

Credit Card # _____ - _____ - _____ Card Holder Signature **X** _____

WAIVER AND RELEASE

Please read this form carefully and be aware that in signing up for and participating in programs/activities, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you might sustain as a result of participating in any and all activities connected with and associated with said programs/activities (including transportation services/vehicle operation, when provided). I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims against the Glencoe Park District and School District 35, including their officials, agents, volunteers and employees (hereinafter collectively referred to as "Park/School District"), which I may have (or that accrue to me) as a result of participating in these programs/activities. I do hereby fully release and forever discharge the Park/School District from any and all claims for injuries, damages, or loss that I may have or which may accrue to me arising out of, connected with, or in any way associated with these programs/activities. I have read and fully understand the above important information, warning or risk, and waiver and release of all claims. If registering via fax, I understand my signature shall substitute for and have the same legal effect as an original form signature. Photos are periodically taken of participants in a class, during a special event or at the District's parks and facilities. Please be aware that these photos are for Park District use only and may be used in the District's publications. I am aware and in agreement with the seven day cancellation policy for enrichment programs and fees included.

X _____
Signature of Parent/Guardian Date

PROGRAM PARTICIPANT CONTACT ROSTER POLICY

The Park District frequently receives requests from program participants, or from their parents/guardians, for names and telephone numbers of other participants in a particular program. The Park District is willing to provide this information so that participants or their parents/guardians may coordinate their activities in connection with the program. Names and telephone numbers will be included in a class/activity contact roster that is available to other participants in that specific program or to their parents/guardians upon request. If you DO NOT wish to have the name and telephone number of the Registrant above to be included in the contact roster for the program you have registered for, you must contact the Park District in writing five days prior to the date the program or activity begins. The Park District is not responsible for the content of any communications made or received by program participants or their parents/guardians, or for the use or further distribution of such contact information by other participants. Unless you notify the Park District that you do not wish to allow this contact information to be given to other participants, by signing this waiver and release you agree to waive and release the Park District from any liability of any kind with respect to the inclusion of the name and telephone number of the Registrant in the contact roster for the program(s) for which you are registering, in addition to the other matters to which the waiver and release applies.

PARTICIPANTS WITH ALLERGIES

Participants with allergies, such as allergies to bee stings, peanut products, dairy, etc., may be at risk of a serious allergic reaction while participating in a Park District program due to contact with, or ingestion of the allergen. The Glencoe Park District cannot guarantee an allergen free environment, but with your cooperation we can create a safer environment and be better prepared to handle emergencies. The Park District will make reasonable, feasible, and practical accommodations to allow participants with life-threatening allergies to participate in our programs. Glencoe Park District requests participants, parent(s) and/or guardian(s) complete and submit a Food Allergy Action Plan and other required forms a **minimum of seven (7) days prior to the participant's first day of attendance** to allow Park District staff time to make accommodations and to train appropriate staff. Forms may be obtained at the Takiff Center main registration desk.

PARENTAL SPORTSMANSHIP AGREEMENT

This agreement is between you, the parents, and the referees and coaches of the Glencoe Park District. This agreement is intended to prevent parental intervention into the playing of the game. One of the perceived problems with athletics is inappropriate parental complaints and overzealous actions toward the players, coaches and referees during the playing of the game. Your "job" as a parent is to root for your child and your child's team, not to complain about the referee's calls or the coaching and decision making of the volunteer parents. Athletics provides an opportunity for our children to learn about good sportsmanship in a team sport environment. They do not often learn this in school. They learn sportsmanship by example; and you, the parent, are your child's best example. By signing the registration form, you agree to be an active (or passive), but positive, fan at the game; not a disruption. The first offense for disrupting an athletic game or event or others' enjoyment of the game, will result in a warning to the parent and possible suspension from attendance for one game. A second offense will mean that you will not be allowed to attend your child's games or event for the remainder of the season. If you continue to attend your child's games after a second warning or continue as a disturbance in any way, you and your child will be removed from the team roster/program for the remainder of the season.

X _____
Signature of Parent/Guardian Date

ADA INFORMATION

Do you need any accommodation, in accordance with the Americans with Disabilities Act, to participate in or use the above activity, program, or facility?
 YES If yes, please contact Cheryl DeClerck at (847) 835-7535. If you do not hear from us prior to the start date of the program, we encourage you to contact the Park District.