

ACTIVITY REGISTRATION FORM

Please print and fill out completely

Today's Date: _____ Add Swim to Liberty Park only.

Applications will be processed on a first-come, first-serve basis. Return application to Jennifer DeRuwe at jderuwe@spokanepolice.org, School Resource Officer Ed Richardson at EdR@spokaneschools.org (509-354-5151), or mail to 1100 W Mallon, Spokane, WA 99260.



Participant A	Last Name	First Name	M.I.	Birth Date	Age	Shirt Size	<input type="checkbox"/> M <input type="checkbox"/> F
Address (if different from parents)		City	State	ZIP	Name of School		
Participant B	Last Name	First Name	M.I.	Birth Date	Age	Shirt Size	<input type="checkbox"/> M <input type="checkbox"/> F
Address (if different from parents)		City	State	ZIP	Name of School		
Participant C	Last Name	First Name	M.I.	Birth Date	Age	Shirt Size	<input type="checkbox"/> M <input type="checkbox"/> F
Address (if different from parents)		City	State	ZIP	Name of School		

Statistical Information (birthdate, age, gender & school of participant) is used for demographics and to customize course activities.

Home Address			Home Phone		
City	State	ZIP	E-mail		
Mother's Name		Cell Phone		Work Phone	
Father's Name		Cell Phone		Work Phone	
Email address					

ONE LOCATION PER PARTICIPANT. Write SCHOLAR if requesting scholarship. Check each activity participant is interested in.

Participant(s)	Dates	Location	Time	Activities
<input type="checkbox"/>	Tuesdays 6/26-7/31	West Central A. M. Cannon Park 1920 W Maxwell	11:30 AM-2:30 PM	<input type="checkbox"/> Baseball, <input type="checkbox"/> Basketball, <input type="checkbox"/> Running Clinic, <input type="checkbox"/> Flag football, <input type="checkbox"/> Soccer, <input type="checkbox"/> Golf
<input type="checkbox"/>	Wednesdays 6/27-8/1	Hillyard Shaw Middle School 4106 N Cook	11:30 AM-2:30 PM	<input type="checkbox"/> Baseball, <input type="checkbox"/> Basketball, <input type="checkbox"/> Running Clinic, <input type="checkbox"/> Flag football, <input type="checkbox"/> Soccer, <input type="checkbox"/> Golf
<input type="checkbox"/>	Thursdays 6/28-8/2	East Central Liberty Park 1704 E 4th Ave	10:30 AM-11:00 AM	<input type="checkbox"/> Swim lessons at Liberty Aquatic Center
			11:30 AM-2:30 PM	<input type="checkbox"/> Baseball, <input type="checkbox"/> Basketball, <input type="checkbox"/> Running Clinic, <input type="checkbox"/> Flag Football, <input type="checkbox"/> Soccer, <input type="checkbox"/> Golf
All Park End of Season Celebration on Thursday, 8/2/18, Liberty Park 11:30-2:30				

LIABILITY WAIVER, RELEASE & INDEMNITY AGREEMENT

I agree to release, indemnify, and hold the city, its agents, officers and employees harmless from any and all liability claims, actions, judgments, damages or injuries of any kind and nature whatsoever to the participant and/or his property arising from participation in activities for which the participant is registering. I further acknowledge that I have familiarized myself with the description of the activities, understand the hazards and the participant's personal limitations and knowingly assume all risks. I acknowledge I have read and understand this Liability Waiver, Release and Indemnity Agreement, and understand that I am waiving any claim I might have against the City for any harm sustained as a result of any activity for which I am registering a minor child.

Signature of Responsible Adult

Date

For special accommodations please contact us directly.

May we use your photo/video image taken during activities for publicity purposes?

Yes No Initial here _____