

KUDOS FOR KIDS
MENDOCINO COAST RECREATION AND PARK DISTRICT REGISTRATION FORM

(School Year)

Please Print Clearly

Child's Full (legal) Name: _____ Age: ____ Sex: ____ Grade: _____ Rm# _____

Parents Name(s): _____ Home Phone: _____ Work: _____

Full Street Address: _____

Full Mailing Address: _____

Emergency Contact Person (Other than Parents): _____ Phone: _____

I give permission for my child to ride the school bus to KUDOS 4 KIDS sponsored activities during the school year 2006-2007. I understand that these activities are sponsored by M.C.R.P.D. & F.B.U.S.D. and agree to the signed waiver and release below.

[] My child will be riding the bus at 5:00p.m. to the following address if different from above _____.

[] I will be picking my child from the program and also give permission for the following people to pick up my child(ren) during KUDOS 4 KIDS: _____

My child has the following special needs/allergies/medical issues you should be aware of: _____

AGREEMENT, WAIVER AND RELEASE

I have carefully read the description of the class(es) for which I/we are registering. In consideration for being permitted by the above district to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the above district (its officers, employees, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risks is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity.

PARENTAL CONSENT: (TO BE COMPLETED AND SIGNED BY PARENT/GUARDIAN)

I hereby consent that my son/daughter (named) _____, participate in the above activity, and I hereby execute the above Agreement, Waiver, and Release on his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of the death or any injury or property damage that said minor may sustain while participating in said activity.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT AND I SIGN IT OF MY FREE WILL.

(Parent Signature)

(Print Name)

(Date)

Additional information: The homework lab is free. If your child is attending the homework Lab only there is no fee. If your child is also staying to participate in the enrichment classes a material fees is required. **Required Payment For Entire School Year: 50.00.** If a refund is desired, MCRPD must be notified prior to the start of the activity/class. If a refund is requested, a \$5 cancellation fee will apply unless the District is forced to cancel a class, in which case a full refund will be issued. No refunds after a program has commenced. Refunds may take up to 45 days. Late enrollees for a class must pay the entire fee; classes are not prorated. No make-ups or credits will be given for missed classes. Registration is on a first come, first served basis; no telephone registrations will be taken.

Receipt # _____ Amount Paid \$ _____ Enrichment class session # _____