

Parks, Recreation & Cultural Resources 2020 – 2021 ADULT Program Registration Form

Participant Last Name:	Participant First N	lame:
E-Mail Address:		
Address:		City:
State: Zip:	Home Number:	
Cell Phone:	_ Cell Provider (to receive text a	llerts):
Emergency Contact Name:	P	hone Number:
Emergency Contact Name:	P	hone Number:
Any special needs requiring accommodations:		

REFUND POLICY

- All requests for refunds must be in writing.
- 100% refund if Department cancels class or athletic league
- 100% refund for requests received at least 14 calendar days prior to the class starting or teams being selected, minus a \$5 administrative refund fee
- 50% refund for requests received less than 14 calendar days prior to a class starting or teams being selected, only if the spot can be filled from the waitlist. No refund requests will be considered if there is not a waitlist.
- Medical hardships cases will be handled at the discretion of the Parks, Recreation & Cultural Resources Director and medical documentation may be required during the review of the refund request.
- No refund will be considered after completion of classes, facility rentals, or athletic leagues.
- Please refer to the refund policy for further details.

CONSENT TO PARTICIPATE WAIVER

I, for myself or as parent or guardian, hereby assume all the risks and hazards incidental to the conduct of the activities, and transportation to and from the activities. I release, absolve and indemnify the Town of Morrisville, employees of the town, volunteers, contractors and/or sponsors from all risks and hazards associated with the activities and in the event of injury, do expressly waive all claims against them. I understand that no insurance coverage is provided by the Town of Morrisville Parks, Recreation and Cultural Resources Department. I also agree that participant's likeness may be photographed or videotaped and that such image may be published in an outlet used to promote or publicize town programs.

COVID-19 - The novel coronavirus (COVID-19) has been declared a worldwide pandemic by the World Health Organization COVID-19 is contagious and is believed to spread mainly from person-to-person contact. I hereby acknowledge the contagious nature of COVID-19 and voluntarily assume the risk of infection of COVID-19 by participating in the program's activities. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, or death), that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance or participation in the program activities resulting from such exposure or infection. On my behalf, and on behalf of my children, I hereby release, discharge, and hold harmless the Town of Morrisville, its employees, volunteers, contractors and/or sponsors from any claims, actions, damages, costs or expenses of any kind arising out of or relating to such exposure or infection.

sponsors from any claims, actions, damages, costs or expens	es of any kind arising out of or relating to such exposure or	mection
Participant Signature:	Date:	