

2012 Class Registration Form
City of Beavercreek Parks, Recreation & Culture Department

Participant Last Name _____ First Name _____
Birth date _____ Age _____ Male/Female _____
Parent/Guardian Last Name _____ First Name _____
Street Address _____
City _____ State _____ Zip Code _____
Home Phone (____) _____ Work (____) _____
Emergency Contact _____ Phone _____
Email Address _____
Class Name: _____ Start Date: _____ Time: _____
Tshirt Size (if applicable): _____

Release of liability

In consideration of you accepting my or my child's registration, I hereby, for myself, my child, my heirs, executors and administrators, wavier and release any and all rights and claims for damages I or my child may have or may acquire in the future against the City of Beavercreek and its representatives, successors and assigns for any and all injuries suffered by myself or my child in connection with the said program(s). I do hereby grant and give these groups the right to use my or my child's photograph or image with or without my child's name, both singly and in conjunction with other persons or objects and presentations, advertising, publicity, and promotion relating thereto. I warrant that I have the right to authorize the foregoing uses and do hereby agree to hold the City of Beavercreek and its representatives, successors and assign harmless of and from any and all liability of whatever nature which may arise out of or result from such program(s). For the consideration stated above, I further agree that in the event that my child repudiates or attempts to repudiate such release, I will personally indemnify and safe harmless the City of Beavercreek Parks, Recreation and Culture Department, its successors and assigns, for any and all loss and damage occasioned thereby.

SIGNATURE: _____

By Participant, Parent of Guardian

If participant is under 18, this must be signed by parent or guardian

Payment information

- Cash
- Check
- Credit Card (there is a 6.5% convenience fee on each transaction)
 - Account Number _____
 - Expiration Date _____
 - Signature _____

Mail Forms and payment to:

City of Beavercreek
789 Orchard Lane
Beavercreek, OH 45434

Checks should be made payable to: City of Beavercreek

For more information, please contact 427-5514 or parks@ci.beavercreek.oh.us