



Pendleton Parks & Recreation



- Complete one form for each participant
- Pre-registration with payment is required for all activities, except where noted.
- Activities are filled according to first come/first served.
- Register early! Space is limited!

Personal Information

| | | |
|------------------------|--|---|
| First Name | <input type="text"/> | * |
| Last Name | <input type="text"/> | * |
| Email | <input type="text"/> | * |
| Gender | <input type="text"/> | * |
| Date Of Birth | <input type="text"/> <input type="text"/> <input type="text"/> | * |
| Primary Phone Number | (<input type="text"/>) <input type="text"/> <input type="text"/> ext: <input type="text"/> | * |
| Secondary Phone Number | (<input type="text"/>) <input type="text"/> <input type="text"/> ext: <input type="text"/> | * |
| Address | <input type="text"/> | * |
| City | <input type="text"/> | * |
| State | <input type="text" value="Oregon"/> | * |
| Postal Code | <input type="text"/> | * |

REQUIRED INFORMATION

Medical Info

| | | |
|-------------------|----------------------|----------------------|
| Allergies | <input type="text"/> | OPTIONAL INFORMATION |
| Medication | <input type="text"/> | |
| Medication Reason | <input type="text"/> | |

Emergency Contacts

| | | |
|--------------|--|----------------------|
| First Name | <input type="text"/> | OPTIONAL INFORMATION |
| Last Name | <input type="text"/> | |
| Phone | (<input type="text"/>) <input type="text"/> <input type="text"/> ext: <input type="text"/> | |
| Relationship | <input type="text"/> | |

MORE ON PG 2...

| Program/Start Date & Time | Amount |
|---------------------------|--------|
| | |
| | |
| | |
| | |

| | |
|---------------------|-----------|
| Debit/VISA or MC# | Exp. Date |
| Print name on card: | |
| Signature: | Date |

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Waiver/Model Release/Consent for Treatment

I, the parent or guardian of the above named participant, agree that we will abide by the rules of the Pendleton Parks & Recreation Department and its affiliated organizations and sponsors.

I hereby acknowledge and accept all risks and hazards incidental to participation in such activities. I hereby release, absolve, indemnify and hold harmless the City of Pendleton, the Parks & Recreation Department, its employees and agents, including owners of any facilities used for various departmental programs from any liability for injury whether to person or property of the participant.

By enrolling in or attending any class or activity sponsored by Pendleton Parks and Recreation, I consent to have my child’s photograph taken and allow usage of these photographs in future publications by Pendleton Parks and Recreation. I understand that names will never be included unless my permission is granted.

I give permission for the Pendleton Parks and Recreation Department staff, instructors or volunteers to seek emergency medical assistance in the event they are unable to reach me at the numbers I have provided.

I have read the waiver/model release/consent for treatment form.

Parent/Guardian (please print and sign)

Date