Precious Homecare Agency & Adult , Children day care Centre

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Adult and Children)

Recreation Program Registration Form

| Program Registration | | | | | | | |
|--|--------------------------|----------------------------|------------------|-----------|------------------|--|--|
| Participant Last Name: | | Participant First Name: | | | | | |
| Date of Birth (MM/DD/YYYY): | Current Age: Gender: | | | | | | |
| Mailing Address: | Town: | | | | | | |
| Postal Code: | Phone #: | | | | | | |
| Email Address (for important program updates/changes): | | | | | | | |
| Would you like to receive email updates about future programs? Yes, please No, thanks | | | | | | | |
| Emergency Contact: | | Emergency Contact Phone #: | | | | | |
| Program Name | Week Days | End Date | Tin | ne | Fee (before HST) | | |
| | | | | | | | |
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| | | | | | | | |
| Do you have any allergy/med If "Yes", please explain <u>Media Release:</u> | ical/general health cond | cerns that progran | n staff should k | e aware o | f? □Yes □No | | |
| | | | | | | | |

By completing and signing this form, you grant permission for the reasonable use of pictures containing the participant(s) named above in any or all of the following ways: Brochures, Bulletin Boards, Municipal Reports, Newsletters, Power Points, Promotional Material, Website.

Do we have permission to photograph and publish the photo of the registrant?

Release Statement:

I hereby release, discharge, relinquish, give up, forego, waive, and otherwise completely exonerate h # it's agents and staff from any claims for damages arising from any accident or injury which is caused by or arising from the participation of the applicant named above, during any program or in any facility or at any location where a program is being held. I also give permission to be treated by emergency personnel in case of accident.

I am also confirming that I have read and understood all Recreation Program Terms & Conditions.

| Participant Signature: | Date: |
|------------------------|-------|
| | |

| Payment Information (Office Use Only) | | | | | |
|---------------------------------------|---------|--------|--------------------|--|--|
| □ Cheque | 🗆 Debit | 🗆 Cash | Total (incl. HST): | | |
| Date Processed: | | | Employee Initial: | | |

Recreation Program Terms & Conditions

Registering for any Town of Parry Sound recreation program constitutes acceptance of the Terms and Conditions contained herein and attached hereto.

Registration

Programs must be paid for in full at the time of registration. Payment can be made by cheque, debit card or cash. Cheques are made payable to the Town of Parry Sound.

Program Participant Age

Town of Parry Sound programs are designed for the age range specified. Age ranges are put in place to create an engaging program for all levels of skill and development in participants. Participants must be within the age range specific to their program of choice on the start date of that program. If you have any questions about the age requirements for a program, please contact the Town of Parry Sound.

Payment

Payment for recreation programs may be submitted along with a completed Registration Form in-person at the Town Office, or mailed to the Town Office with accompanying Registration Form.

Refunds & Cancellations

Participants enrolled in a program may withdraw by phone or in person up to five days prior to the program start date.

If you wish to withdraw within five days of the start date, a refund will only be issued if there is an active waitlist, and the spot is able to be filled.

The Town of Parry Sound reserves the right to cancel programs that do not meet minimum registration numbers. Should this be the case, participants will be notified, and a full refund will be issued. Please do not wait until the last minute to register.

Some instances out of our control may require programs to be cancelled, and may include: Instructor Illness/Availability, Poor Weather Conditions, Facility Closure/Not Available, Emergencies. If a class is cancelled during a program session, we will attempt to provide a make-up class, but in some instances this may not be available, and no refund will be provided. The Town of Parry Sound will do its best to provide sufficient notice prior to the program start time.

If you do not hear from us, assume the program will go ahead as planned. If you are unsure, please feel free to contact us.

Waitlist

Participants who register for a full program will be added to a waitlist. In the event of a cancellation, those on the waitlist will be contacted about joining the program in order of the date they were added to the waitlist.