



Program Registration Form

Fall 2021

Registration Begins for Residents: Upon Receipt | Non-Resident: August 30, 2021

General Information

Date _____ (Check) Resident Non-Resident

Family Last Name _____ *Home Phone _____

Street Address _____ *Work Phone _____

City _____ Zip _____ *Cell Phone _____

*E-mail Address: _____

Choose Your Program

Class Code	Activity Name	Fee	Participants First Name	M/F	Date of Birth	Grade

Total Payments Included: \$ _____	Receipt #: _____
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In case of refund: Name checks should be made out to (please print): _____

Please note any special needs including food allergies: _____

(Please note: It may require 48 hours notice for accommodations)

Please complete this portion only if mailed or faxed in

Indicate your choice of payment: Check Cash Bank Charge

Bank Charge Information:

1. Visa Master Card Discover Amex 2. CVC Number _____ 3. Expiration Date _____

4. Cardholder # _____ 5. Signature _____

4 EASY WAYS TO REGISTER



1- In Person

Come to the Wauconda Park District Located at 600 N Main Street during office hours (located on page 3) and we will guide you through the registration process. Please bring payment with you: cash, check, or Visa/Mastercard/Discover Card/American Express. If a class is full, we can help you find another or put you on a waiting list. After hours, you can leave registration forms or payment in our night time drop box, located in the Community Center circle.



2- By Mail

Using the registration form located in this brochure, fill out completely, sign waiver on the back, include payment, and mail to us-600 N Main Street, Wauconda, IL 60084. If we receive your registration before the registration dates that apply to you, we will hold until the proper time. If a class is full, we will call you with options.



3- By Fax

Using the registration form located in this brochure, please fill out completely, including the waiver on the back. Be sure to include all program information and a credit/debit card number with an expiration date. Fax both sides of the form to (847) 526-3791 anytime of day. If a class is full or we do not have all the information that is necessary, we will call you.



4- Online

Visit our website at www.waucondaparks.com and go to the registration page. You can register for programs using our secure server and a credit card. Be sure to see all the other great Park District information and updates that are available to you on this site. You can e-mail us with any questions by clicking the contact us tab on our website, and we will return your inquiry.

Satisfaction Guarantee/Refunds

The Wauconda Park District is constantly striving to offer you the best in recreation activities, events, and programs. If you are not completely satisfied, please tell us and we will arrange one of the following:

- You may transfer to another class if space is available or have the fee left as a class credit for future use.
- A pro-rated refund will be provided if requested prior to the third class meeting.
- Upon proof, a pro-rated refund will be given for medical reasons or moving out of town.
- All refunds are subject to a \$5 service charge.
- Refunds are not given for facility passes, leagues, trips, special events, club, preschool, or summer day camp.
- Refunds can take up to three weeks to process and are mailed by check, credit back to your credit card, or class credit.
- A pro-rated class credit will be processed for contractual class requests up to the third meeting.
- Participants registered for classes that are cancelled due to low enrollment will be issued a class credit for future use. Participants must request a refund if they would like their class credit refunded.
- Refund requests must be submitted a minimum of five days before the start of a class session in order to receive a full refund minus the \$5 service charge. Refund requests made four days or less before a class starts will be refunded at 50% of the class cost less a \$5 service charge.

Waiver

The Wauconda Park District is committed to conducting its recreation programs in a safe manner and holds the safety of participants in high regard. The Wauconda Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program/activity must recognize that there is an inherent risk of injury when choosing to participate in recreational activities. You are solely responsible for determining if you or your minor child/ward are physically fit and/or skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury, or impairment, to consult a physician before undertaking any physical activity.

Warning of Risk

Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity/program. Understandably, not all hazards and dangers can be foreseen. Participants must understand that certain risks, dangers, and injuries due to acts of god, inclement weather, slipping, falling, equipment failure, failure in supervision, premises defects, and all other circumstances inherent to recreational activities/programs exist. In this regard, it must be recognized that it is impossible for the Wauconda Park District to guarantee absolute safety.

Waiver and Release of all Claims and Assumptions of Risk

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages, or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services, when provided.)

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Wauconda Park District, including its officials, agents, volunteers, and employees (hereinafter collectively referred as "Wauconda Park District".)

I do hereby fully release and forever discharge the Wauconda Park District from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with this program/activity.

I have read and fully understand the above important information, warning of risk, assumption of risk, and waiver and release of all claims. If registering a minor participant, I further attest that I have read the above to my minor child/ward.

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PARTICIPANT'S NAME

SIGNATURE OF PARTICIPANT/PARENT/GUARDIAN

Date