



Registration Form

COMMUNITY CENTER

15557 Fifth Street, Lathrop
 (209) 941-7370
 Monday – Thursday 9:00AM-6:00PM
 Friday 8:00AM-5:00PM

GENERATIONS CENTER

450 Spartan Way, Lathrop
 (209) 941-7372
 Monday – Thursday 9:00AM-6:00PM
 Friday 8:00AM-5:00PM

SENIOR CENTER

15707 Fifth Street, Lathrop
 (209) 941-7380
 Monday – Friday 9:00AM-4:00PM

LAST NAME (PARENT/GUARDIAN)	FIRST NAME (PARENT/GUARDIAN)	HOME PHONE ()
STREET ADDRESS		CITY
E-MAIL ADDRESS		ZIP
		In Case of Emergency (Name and Phone Number) ()

Activity Name	Participant Last Name / First Name	Birth Date	Gender	T-Shirt Size Youth/Adult	Fee
TOTAL					

Does your child have special needs? YES / NO (If yes, please indicate)
Does your child have any existing medical conditions? YES / NO (If yes, please indicate)

THREE WAYS TO REGISTER

- Register in person at any of our Recreation Centers listed above.
- Mail registrations and payments to:
 Parks & Recreation Department
 15557 Fifth Street
 Lathrop, CA 95330
- Online @ www.ci.lathrop.ca.us/parksrec

In consideration for myself and my minor children being permitted by the City of Lathrop Parks, Recreation & Maintenance Services Department to participate in activities I hereby release and hold harmless to the fullest extent permitted by law the **City of Lathrop, its employees, officers, officials, agents and volunteers** for any and all injury, disability, death, or loss or damage to person or property, arising from my participation in the above activity, including my use of equipment or facilities, including any such claims which allege negligent acts or omissions to the extent permitted by law; I hereby waive, release and discharge in advance the City from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the released parties referenced as "City" above. I understand that this activity involves risk and danger of accidents and knowingly assume those risks by my signature below. It is further agreed that this waiver, release and assumption of risk is to be binding on my relatives, heirs and assigns. I agree to indemnify and to hold the **City of Lathrop, its employees, officers, officials, agents and volunteers** free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or injury or property damage that I may sustain while participating in said activity. The described activity may be of hazardous, strenuous, and/or physical nature. Participation in the described activity may occasionally result in bodily injury, personal injury, sickness, disease, death or property loss or damage, arising from the coronavirus disease ("COVID-19"), and the severe acute respiratory syndrome coronavirus 2 ("SARS-CoV-2"). I acknowledge the contagious nature of COVID-19 and other communicable diseases and voluntarily assume the risk that I may be exposed to, or infected by COVID-19 by participating in the above activity, and that such exposure or infection may result in personal injury, illness, permanent disability, and death. Knowing the risk involved, nevertheless, I voluntarily request permission for myself or minor child to participate in the described activity. In the event that said minor requires medical or surgical treatments while under the supervision of said city personnel in connection with the described activity, such supervision may authorize treatment. I will pay all medical, hospital, or other expenses which I or my minor children may incur as a result of such treatment. I attest that I have no known medical conditions, and have not used any form of alcohol or drugs (prescription or non-prescription) that could jeopardize my safety, or the safety of others during this activity. I should not enter and participate in the activity unless I am medically able and properly trained. I agree to abide by all rules, regulations and instructions of the activity, as well as all applicable municipal and state laws and regulations.

I expressly permit said minor child to travel by private automobile to activities and events related to the described activity.

Activities are not child care as defined by the State of California.

I understand city staff may photograph or videotape me and/or my minor children and the city may use such photographs or videotapes to promote city programs and classes. I expressly allow, and hereby waive any objection to, the City's photographing and/or videotaping of me and/or my minor children when I and/or my minor children are participating in a city recreation program. I understand all photos and videotapes will remain the property of the City of Lathrop. I certify that I have custody or am the legal guardian of said minors. I further understand and consent that I will periodically be receiving communications related to my participation in the activity.

FOR VIRUTAL CLASSES AND PROGRAMS: I also hereby warrant and agree, that the conditions of my environment are safe, free from obstructions, and are suitable for participation in the above-referenced activity. I further understand and agree that any material downloaded, viewed or otherwise obtained through my participation in said activity is done at my own risk and the City is not responsible for any loss, alteration, corruption or other damage to my personal property, including computers, networks and other property used as part of my participation.

I expressly agree that this waiver is intended to be as broad and inclusive as is permitted by the laws of the State of California. I, the undersigned participant, have carefully read this Assumption of the Risk, Waiver and Release of Liability and fully understand its contents. I am aware that this is a release of liability and a binding contract between myself and the City of Lathrop, and I sign it of my own free will. I understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing this Waiver and Release freely and voluntarily and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Name: _____ Date: _____

Signature: _____