EXPRESS REGISTRATION FORM



Four easy ways to register...

ON-LINE

Try our new online registration

Visit our website to create an account and to register for any program or activity listed in the Leisure Guide

Website at: www.cityofalhambra.org

PHONE/FAX

Call in or Fax registration & Credit Card Info to a Division Office Mon.-Fri., 8am - 5pm. Leisure Classes & Family Excursions (626) 570-3242 (626) 284-0310 Fax Youth & Adult Sports (626) 570-5081 (626) 289-6842 Fax Swimming Lessons (626) 570-5093 (626) 308-9314 Fax

Seniors Programs (626) 570-5056 (626) 824-0310 Fax

WALK-IN

Bring registration form and

payment to a Division Office Mon.– Fri., 8:00 am – 5:00 pm Alhambra Park Office 500 North Palm Avenue Almansor Park Office 800 South Almansor Street Granada Park Office 2233 West Whitney Drive Joslyn Adult Recreation Center 210 North Chapel Avenue

MAIL-IN

Mail completed registration form and payment (No Cash)

Mail to: City of Alhambra 111 South First Street Alhambra, CA 91801

ACTIVITY REGISTRATION

Use this form to register for any class and Family Excursion for which an activity code is assigned Do not use this form for senior services, aquatics or recreation registration.

Please make your Checks payable to the City of Alhambra (cash payment must be in exact amount)
PLEASE PRINT & FILL OUT COMPLETELY

Last Name (Parent/Guardian/Responsible Adult)				First Name				
Address								
City			S	tate	Zip Code	<u> </u>		
	()			()		()	
Email Address	C	Day Phor	ne		Cell Phone	Eme	rgency Phone	
PARTICIPAN LAST	NT NAME FIRST	AGE	GENDER	CODE	ACTIVIT	/ NAME	DAY/TIME	FEE
ALL RECREATION FACILITIES AND PARKS IN THE CITY OF ALHAMBRA ARE SMOKE FREE!						Total		
PARTICIPANT WAIVER – Babove-mentioned activity,				, ,	ng for the above ant the City of		NSFER POLICY – Tra f the participant can	

risk, and responsibility while participating in said activity for me and/or for my child/ward. I certify that the participant(s) named above is/are in good health, have no physical impediments which would endanger him/her from participating in said activity. I voluntarily waive any claim or cause of actions for damages or injuries that I or my child/ ward may acquire, or might later claim to acquire, against the City of Alhambra, its employees and representatives, by reason of illness or injuries, in any manner or for any cause, that I or my child/ ward shall suffer or sustain during my or his/her participant, and if applicable, transportation by bus or van in the youth sports program. I also grant my permission for any emergency medical attention which may be required

PHOTO RELEASE – By registering for the above mention activity, I hereby grant the City of Alhambra permission to use my or my child's/ward's likeness in a photograph in any and all of its publications, including website entries, without payment or any consideration. I understand and agree that these materials will become the property of the City of Alhambra and will not be returned. I hereby irrevocably authorize the City of Alhambra to edit, alter, copy, exhibit, publish or distribute my photo of my child's/ward's photo for the purpose of publicizing the City of Alhambra's programs/services or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written of electronic copy, wherein my likeness or the likeness of my child/ward.

REFUND/TRANSFER POLICY – Transfers will only be granted if the participant cancels **PRIOR** the second class meeting. A \$10 processing fee will be assessed for all refunds. Full refunds will be issued only if the class is canceled by the City of Alhambra. The city is not responsible for accidents or other incidences occur out of the city's control and there will be no compensation for the missed class.

ALL SALES ARE FINAL FOR SWIM PASSES, RECREATION SWIM, LAP SWIM & AQUA AEROBICS - NO REFUNDS WILL BE ISSUED.

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Form of Payment:					
Cash \square Check/Money	Order #	Visa/Mastercard/Discover #		Exp Date	
Security Code #	Signature		Date		