CITY OF BALDWIN PARK
Department of Recreation & Community Services
4100 Baldwin Park Boulevard
Baldwin Park, CA 91706

PARTICIPANT INFORMATION

Participant Name:_____

Address:_____

City:_____State:_____Zip:_____

Phone:_____Age:_____D.O.B.:_____

Name of Parent / Legal Guardian: _____

Emergency Contacts:

Name:_____Relationship:_____

Home Phone:_____Work/Cell:_____

Name:_____Relationship:_____

Home or Cell Phone:_____Work/Cell:_____

The individuals listed above are authorized to pick up my child or be contacted in case of an emergency:

Doctor: _____Phone:_____

Hospital Preference:_____Insured: Yes___ No_____

List any physical limitations (if any):_____

Medical Problems (if any):_____

Allergies (if any):_____Medications (if any):_____

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WAIVER, RELEASE AND INDEMNITY FORM

PLEASE READ AND SIGN THE WAIVER, RELEASE AND INDEMNITY AGREEMENT BELOW

For being permitted to participate in the City of Baldwin Park's recreational programs, I agree to:

1. To the broadest extent of the law, release, indemnify and hold harmless the City of Baldwin Park, its officers, agents, employees, volunteers and representatives (collectively "City") and any other owner of any facility on which program activities occur, for and against any loss, damage, cost, including providing or failing to provide any emergency medical treatment or attorney's fees, related to the Participant(s)' participation in the program or use of any facilities made available through the City concerning its program, regardless of the negligence (gross negligence or willful misconduct, excepted) of the City or dangerous or defective condition concerning the City's equipment or facilities;
2. Acknowledge and assume full responsibility for any potential risk of bodily injury, death or property damage related to the Participant's participation in the program;
3. Permit any emergency medical treatment to the Participant related to any injury to the Participant;
4. Read, acknowledge, and agree to all rules and regulations outlined in the City's Recreational Facilities Conduct and Use Policy, in current form, and as amended, and that I am responsible for knowing such policy;
5. Irrevocably consent to the use of media of myself or the Participant and the display of such media for promotional use by the City, including on the City's internet site; and
6. Understand and acknowledge that this form is a public record that may be subject to disclosure at the City's discretion.

I acknowledge that foregoing release and waiver is intended to be as broad and inclusive as permitted by the law of the State of California and that if any portion thereof is held invalid, the balance shall continue in full legal force and effect. I further waive California Civil Code Section 1542, which states: "A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release which if known by him must materially affected his settlement with the debtor." In signing this agreement, I represent that I am of sound mind, have read, and voluntarily sign this agreement on behalf of myself, any minors within my legal custody, and my and the Participant's personal representatives, heirs, assigns and next of kin.

I REPRESENT AND WARRANT THAT I HAVE CAREFULLY READ AND FULLY UNDERSTAND THE CONTENTS OF THIS RELEASE AND WAIVER. I ALSO CERTIFY THAT I AM MENTALLY CAPABLE OF SIGNING THIS WAIVER AND THAT I AM OVER THE AGE OF 18 OR HAVE OBTAINED THE CONSENT OF MY PARENT(S) AND/OR GUARDIANS.

_____
Participant Name (please print) Date

_____
Signature Date

_____
Signature of parent or guardian if Participant is under 18 years of age Date

_____
Address Date of Birth

Office Use Only:

Staff Initials:_____Rec'd Date:_____Receipt #:_____