City of Dunedin Parks & Recreation Department

Self-Registration Form

Use this form to self-register for a program with the Dunedin Parks & Recreation Department. Please make sure to fill this form out completely and include payment with either check or credit card (Checks made out to "City of Dunedin"). **NO CASH.** When completed, you may mail this form to: Dunedin Parks & Recreation, 1920 Pinehurst Road, Dunedin, FL 34698. If you use a credit card, you may fax this form to us at (727) 812-4535. You may also choose to enroll online at www.dunedingov.com. You can also drop this in the "Registration Drop Box" located near the front desk at the Dunedin Community Center.

Participant's Name _____ DOB: _____

Address: _____ City:_____ ZIP: _____

Phone Number: (_____) _____ Recreation ID Card #: _____

Activity Registering For: _____ Start Date:_____

Method of Payment: ____Check (#:____) _____Visa ____MasterCard **Amount Paid:** _____

Credit Card Number (with spaces)

Month / Year

Billing Zip Code: _____

I, _____ for myself, my heirs and personal representatives, hereby assume all liabilities, risks, injuries and hazards incidental to participation in all activities and programs offered by the City of Dunedin Parks and Recreation Department or other sponsoring organization, including transportation to or from said activity. I acknowledge the fact that this program may/or does involve physical contact or other conditions where injuries may occur. I do hereby waive, release and agree to hold harmless the CITY OF DUNEDIN, its officers, agents, employees, the organizers, sponsors, activity supervisors, co-sponsoring organizations and participants for and from any claim, demand, liability, costs, suits, charges or compensation for loss or injury of any kind arising out of a loss or an injury, including losses or injuries arising from the negligence of the CITY OF DUNEDIN, its agents or employees and sponsors or activity supervisors, arising from my participation in the said activity. I assume all risk of injury, liability, and loss arising from my participation in or presence at said activity. I acknowledge that the CITY OF DUNEDIN will not assume any costs relating to any injury while I am involved in this activity. This waiver, release and indemnification is in consideration of the CITY OF DUNEDIN or activity sponsor permitting my participation in the activity or program and in further consideration of the CITY OF DUNEDIN not requiring self-funded liability insurance coverage as a condition precedent to my participation in the activity. I freely and voluntarily assume all risk of loss or injury arising from my participation in the activity whether due to my negligence, or the negligence of others. I acknowledge that, absent this release and indemnification, the CITY OF DUNEDIN or other sponsor of the activity would not have offered me access to the activity because of unacceptable exposure to liability claims or the expense of providing a program that is risk-free. I have read and understood this document and sign it freely and knowingly, intending that it shall be fully operative and effective in all respects and that it waives legal rights to which I might otherwise be entitled if I am hurt or suffer loss during my participation in the activity. This Release, Waiver and Indemnification form shall remain in full force an effect for all programs or events until such time as the undersigned withdraws this Release, Waiver and Indemnification form in writing and delivers the same to the City of Dunedin Parks and Recreation Department. YOU MUST CAREFULLY READ THIS DOCUMENT BEFORE SIGNING IT. YOU ARE WAIVING OR RELEASING VALUABLE LEGAL RIGHTS. YOU ARE ADVISED TO SEEK THE ADVICE OF AN ATTORNEY IF YOU DO NOT FULLY UNDERSTAND THIS DOCUMENT.

_____ _____

Participant's Signature (parent if minor) Date