



City of Lancaster Parks and Recreation Participant Information Form



Adult Family Members (17+ years)

1) Name: _____ M / F DOB: _____ DL#: _____
 2) Name: _____ M / F DOB: _____ DL#: _____
 3) Name: _____ M / F DOB: _____ DL#: _____

Youth Family Members (birth – 16 years)

1) Name: _____ M / F DOB: _____ Grade: _____
 2) Name: _____ M / F DOB: _____ Grade: _____
 3) Name: _____ M / F DOB: _____ Grade: _____
 4) Name: _____ M / F DOB: _____ Grade: _____

Address: _____

City, State, Zip: _____ Email: _____

Home Phone: _____ Work Phone: _____

Emergency Contact: _____ Phone: _____

Participant Contract Agreement and Waiver/Release of Liability

I agree to pay in full all membership, program and reservation fees at the time of purchase. I understand that past due payments may be sent to a third party agency for collection. My personal information will only be used for purposes directly relating to my participation in activities operated by the City of Lancaster Parks & Recreation Department. I will abide by all posted policies and rules of this Department, and follow the instructions provided by City staff.

In consideration for being permitted to participate voluntarily in activities through the Lancaster Parks & Recreation Department, I hereby waive, agree to release, and discharge any and all claims for damage for personal injury, death, or property damage, which I may have, or which may hereafter accrue to me, as a result of participation in said activities. This release is intended to discharge in advance the above entity (its officers, employees, agents, co-sponsors or volunteers) from any and all liability arising out of or connected in any way with my participation in said activities, even though that liability may arise out of ordinary negligence or carelessness on the part of the persons or entities mentioned above, now and forever. It is understood that these activities involve an element of risk, and knowing those risks I hereby assume those risks. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, cost, or expense which they may incur as the result of my death, injury or property damage sustained while participating in said activity. I hereby consent to my children, as listed, participating in activities with the same terms as stated above, outlining my own participation.

I have carefully read this document and fully understand its contents. I am aware that this is a release of liability and a contract between myself and the City of Lancaster. I agree to abide by the terms of this agreement, which will renew automatically each time I renew my membership.

Adult 1 Signature	Adult 2 Signature	Adult 3 Signature
Date	Date	Date