

RECREATION ENROLLMENT FORM
VILLAGE OF ELWOOD COMMUNITY ROOM

401 E. MISSISSIPPI AVE. ELWOOD, ILLINOIS 60421 815-423-5011/424-1093

PROGRAM _____

Participant Name _____ Home Phone _____

Address _____

Cell Phone _____ Emergency Phone _____

For children's programs: Grade _____ **Parent Name** _____

Make checks payable to Village of Elwood

**WAIVER AND RELEASE OF ALL LIABILITIES ARISING OUT OF PARTICIPATION IN RECREATION
PROGRAMS OF THE VILLAGE OF ELWOOD PARK AND RECREATION DEPARTMENT**

The undersigned, being under no legal disability, and in consideration of the opportunity to participate in recreation and/or athletic activities conducted by the Village of Elwood Park and/or its Recreations Department, agrees as follows:

I hereby release, remise and discharge the Village of Elwood, its Park and Recreation Department, the Facility Owner and/or Host, their officers, servants, agents and employees from all injuries, losses, and damages to my person that shall have been caused or may at any time arise as the result of injuries, losses, and damages to my person that shall have been caused or may at any time arise as the result of my participation in such activities. It is my intention to completely, absolutely and finally release said Village of Elwood, its Park and Recreation Department and the Facility Owner and/or Host, the aforesaid persons from any and all liability arising wholly or partially from the cause aforesaid.

I do further state and certify that I am in good physical condition, and physically and emotionally capable of participation in such recreation/athletic programs. As a participant in the program, I recognize and acknowledge that there are certain risks of physical injury, and agree to assume the full risk of any injuries, including death, damages or losses which I may sustain as a result of participating in any manner, in any and all activities connected with or associated with such program.

I agree to waive and relinquish any and all claims that I may have against the Village of Elwood, its Park and Recreation Department, the Facility Owner and/or Host, their officers, servants, agents or employees as a result of participating in the program.

The term "I", "me" and "my" refer to parents or guardians as well as participants in the program, I further understand and agree that terms such as "participation", "programs" and "activities" referred to in this Waiver and Release, include all exercises and physical movements of any nature while I am participating in the program.

I understand the nature of these program(s) for which I am registering and have read and fully understand this Waiver.

SIGNATURE _____ **DATE** ____/____/____

Parent, Guardian, or Participant (over 18), Must Sign This Waiver/Registration Form.