

REGISTRATION FORM

ADULT PAYEE INFORMATION

First Name	MI	Last Name	Home Phone ()
Home Address	City	Zip	Alternate Phone ()
E-mail Address			Driver's License / ID Card Number

PARTICIPANT INFORMATION

First Name	MI	Last Name	M/F	Birthdate	Choice	Class Number	Class Name	Day	Start Time	Fee
					First					
					Alternate					
					First					
					Alternate					
					First					
					Alternate					
					First					
					Alternate					
					First					
					Alternate					

CREDIT CARD PAYMENT INFORMATION (only if paying by credit card via mail-in registration)				Total Class Fees
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD	Card Number:	Expiration:	<i>*NON-RESIDENT FEES See <u>underlined</u> below</i>	
Billing Address (if different from above):		City:	Zip:	Grand Total
Cardholder Signature:				
FOR OFFICE USE ONLY				
Check #s:	Cash	Credit Card Auth. #:	Receipt Number:	

I have read and understand the Refund Policy outlined in the Burbank Recreation Guide.

I hereby absolve the City of Burbank, its employees, and officers from all liability which may arise as the result of my participation in the above activities; and, in the event that the above named participant is a minor, I hereby give my permission for his or her participation as indicated and in so doing absolve the City of Burbank, its employees, and officers from such liability. I am aware that if my child or I may have registered for a class involving physical activity, I have taken care to enroll at a class level appropriate to my or my child's physical abilities and/or medical condition. I grant the City of Burbank permission to use my or my child(ren)'s photographs and images for the purpose of publicizing and marketing City activities. I understand that no compensation shall be given for use of these photographs and that these images shall become the sole property of the City of Burbank.

I ACKNOWLEDGE THAT I HAVE READ THE FOREGOING AND HAVE BEEN FULLY AND COMPLETELY ADVISED OF THE POTENTIAL DANGERS INCIDENTAL TO PARTICIPATION IN THE PARK, RECREATION AND COMMUNITY SERVICES PROGRAM AND I AM FULLY AWARE OF THE LEGAL CONSEQUENCES OF SIGNING THIS INSTRUMENT.

By my signature, I hereby certify that I am eighteen (18) years of age or older.

Signature _____ Date _____

PLEASE REMEMBER:

- Mail-In Registration: March 6-13 postmark (Do Not mail before March 6)
- Walk-In & Internet Registration begins March 31 at 9 a.m.
- In order for your registration form to be processed, you must:
 1. **Fill out registration form completely (please print).**
 2. **Enclose payment with your registration form. Checks or Visa/MasterCard are accepted. Please send a separate check for each person/class if registering for multiple classes (Mail-In only). Participants not living in the City of Burbank must include an additional \$5 per person, per class non-resident fee.**
 3. **Sign and date registration form.**
- Enclose a self-addressed, stamped envelope to receive registration confirmation.

Make checks payable to:
CITY OF BURBANK

Mail to:
Burbank Recreation Registration
PO Box 6459
Burbank, CA 91510-6459