



# Parks, Recreation & Community Services

Creating community through people, parks and programs.

6000 Main Street SW, Lakewood, WA 98499 • Phone: (253) 983-7887 • Fax: (253) 589-3774

Adult Last Name	First	Date of Birth
Street Address	City/State/Zip	Would like to receive e-mails about upcoming programs and events from Lakewood Parks, Recreation and Community Services?  <input type="checkbox"/> Yes <input type="checkbox"/> No
E-mail Address		
Phone, daytime	Phone, evening	
Emergency Contact, Name	Emergency Contact, Phone	
How did you hear about the program(s)?		

Participant Name	M/F	Birthdate	Activity Name	Session	Day/Time	Fee
<b>TOTAL</b>						

PAYMENT DETAILS	
(Payment is due in full at time of registration)	
Total Fee: \$	
<input type="checkbox"/>	Cash
<input type="checkbox"/>	Check - #
<input type="checkbox"/>	Credit Card (indicate below):
<input type="checkbox"/>	Mastercard
<input type="checkbox"/>	Visa
Card #	
Expiration Date:	

Participants and parents/guardians of all participants are required to sign the following release. I/we assume all risks and hazards incidental to such participation and do hereby waive, release, absolve, indemnify and agree to hold harmless the City of Lakewood, City of Lakewood Parks and Recreation Department, staff, instructors, coaches and volunteers for any claim arising from injury to my/our child. Furthermore, in case of an emergency, if my child or I should require medical attention, I give permission for a City of Lakewood representative, or the representative's designee, to secure the emergency medical attention required. Any direction to the contrary should be noted on the backside of this form and signed. I agree that pictures taken during program hours may be used for future promotional purposes.

Signature (of participant, or parent/guardian of child participant)
Date:

Registration is NOT VALID without signed waiver and release.