

Aquatic Center Activities Registration Form

Make checks payable to: Independence Parks & Recreation/ We accept credit (w/ minimal fee charged), check (exact amount only), or cash as payment. *Only take Group Swimming Lessons & Aquatics Fitness Classes registrations on this form!!*

Adult Name Last _____ First _____ Initial _____
Address _____ Apt. # _____
City _____ State _____ Zip Code _____
Phone #'s Cell _____ Secondary _____ Emergency _____
Email _____

Participant Name		Swimming Lessons			
Last Name	First Name	M/F	Session/Time/Level	Age	Fees
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Office Only:	Date Rcvd	Staff Initial	Total Paid
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WAIVER FOR PARTICIPANT I agree to assume full responsibility for any risk implicit or direct by participating in any activity for facility. The City of Independence does not provide individual, team, or group accident insurance for participants in Parks & Recreation activities. The individual mentioned above has my permission to participate. I also give permission for any photos of participants taken during the program to be used for future Department promotional materials.

Name _____ Date _____