



# Program Registration Form

## HOW TO REGISTER

**Easy Online Registration** with Visa, MasterCard or Discover at [www.livelifelocally.org](http://www.livelifelocally.org)

Or you may mail, email or register in person at any one of the City's community centers.

San Rafael Community Center  
618 B Street, San Rafael, CA 94901  
[community.services@cityofsanrafael.org](mailto:community.services@cityofsanrafael.org)  
(415) 485-3333

Albert J. Boro Community Center  
50 Canal Street, San Rafael, CA 94901  
[community.services@cityofsanrafael.org](mailto:community.services@cityofsanrafael.org)  
(415) 485-3077

Terra Linda Community Center  
670 Del Ganado Drive, San Rafael, CA 94903  
[terralindapool@cityofsanrafael.org](mailto:terralindapool@cityofsanrafael.org)  
(415) 485-3344

## CONTACT INFORMATION (Please Print)

Name of Primary Contact \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Mobile Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact's Relationship to Participant \_\_\_\_\_

## PARTICIPANT AND COURSE INFORMATION (Please Print)

Participant's Name	Date of Birth (under 18)	Course Title	Course Code	Day/Time	Fee

### Quality Assurance

If after attending the first class you are not happy with the quality of the program, please contact us immediately. We welcome your feedback. If you call before the second class, we will give you a full refund or credit. There are no refunds or credits for non-attendance, one-day workshops, trips or materials fees.

### Swim Lesson Transfers

Requests for transfers must be done in writing or in person at the Terra Linda Community Center and must be at least two working days prior to the start of a session.

## HOLD HARMLESS AND RELEASE AGREEMENT

The undersigned on behalf of himself/herself and on behalf of any child enrolled by the undersigned in the program, in consideration of participation in this program, agrees to indemnify and hold harmless, and to release, waive, and discharge, the City of San Rafael out of or in any way connected with participation by the undersigned or the enrolled child in this program, including injuries due to the active or passive negligence of the City, its offices, and employees. I HAVE READ THE ABOVE HOLD HARMLESS AND RELEASE AGREEMENT AND FULLY UNDERSTAND THAT I ASSUME RISKS FOR ANY INJURIES AND PROPERTY DAMAGE SUFFERED. I also certify that I (or my children) are knowledgeable as to all rules of conduct appropriate to the above-mentioned activity. Neither I nor my child has any physical illnesses, conditions, disabilities or weaknesses that would interfere with safe participation in the activity. I recognize that bodily injury and/or property damage may be sustained through participation in this activity and acknowledge that I/we voluntarily accept all risks of injury to persons or property.

Applicant's Signature's \_\_\_\_\_ Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

By initialing, I do also hereby give my permission to the City of San Rafael to use any and/or all photographs of myself and/or my children for future agency publications. I understand that my name or my children's name(s) will not be published at any time in any publications. I give my permission for a photograph of my child to be used for City of San Rafael marketing purposes. \_\_\_\_\_ Initial

## PAYMENT INFORMATION

Check (Please make your check payable to "City of San Rafael")

Visa  MasterCard  Discover  Card Number \_\_\_\_\_ CRV Code \_\_\_\_\_

Exp. Date \_\_\_\_\_