



# DAY OFF FUN ZONE REGISTRATION FORM (Thanksgiving 2023-Winter Break 2023-24)

(one form per child)

Child's Name \_\_\_\_\_ Parent's Name \_\_\_\_\_

**K-5th Grade:** Looking for some fun filled activities on your day off of school? Day Off Fun Zone is the place to be! Join your friends for a structured day of on-site adventures including arts and crafts, active games, themed activities and more!

Day Off Fun Zone is held at Western Avenue School  
(1500 S. Western Avenue)

Day/Date	Fun Zone Hours (8:00am-2:15pm)	AM Hours (6:30-8:00am)	PM Hours (2:15-6pm)	Registration due date, pending space available
Detailed Participant Profile Forms are required to register for our Day Off Fun Zone	\$47 (N/R \$70) per trip	\$13 (N/R \$19) per day	\$26 (\$39) per day	
THANKSGIVING BREAK				
Due to construction, location changed to Harrison Street School (201 N Harrison St.)				
Monday, November 20	<input type="checkbox"/> 4212006-1A	<input type="checkbox"/> 4212006-1B	<input type="checkbox"/> 4212006-1C	Nov. 13
Tuesday, November 21	<input type="checkbox"/> 4212006-2A	<input type="checkbox"/> 4212006-2B	<input type="checkbox"/> 4212006-2C	
Wednesday, November 22	<input type="checkbox"/> 4212006-3A	<input type="checkbox"/> 4212006-3B	<input type="checkbox"/> 4212006-3C	
WINTER BREAK				
Due to Maintenance, December 27, 28 and 29 location changed to Harrison Street School (201 N Harrison St.)				
Tuesday, December 27	<input type="checkbox"/> 4212007-1A	<input type="checkbox"/> 4212007-1B	<input type="checkbox"/> 4212007-1C	Dec. 20
Wednesday, December 28	<input type="checkbox"/> 4212007-2A	<input type="checkbox"/> 4212007-2B	<input type="checkbox"/> 4212007-2C	
Thursday, December 29	<input type="checkbox"/> 4212007-3A	<input type="checkbox"/> 4212007-3B	<input type="checkbox"/> 4212007-3C	
Tuesday, January 2	<input type="checkbox"/> 4212007-4A	<input type="checkbox"/> 4212007-4B	<input type="checkbox"/> 4212007-4C	
Wednesday, January 3	<input type="checkbox"/> 4212007-5A	<input type="checkbox"/> 4212007-5B	<input type="checkbox"/> 4212007-5C	
Thursday, January 4	<input type="checkbox"/> 4212007-6A	<input type="checkbox"/> 4212007-6B	<input type="checkbox"/> 4212007-6C	
Friday, January 5	<input type="checkbox"/> 4212007-7A	<input type="checkbox"/> 4212007-7B	<input type="checkbox"/> 4212007-7C	

**PERSONS WITH SPECIAL NEEDS:** The Park District makes reasonable accommodations for persons with special needs to participate. Please specify any adaptive equipment, personnel or other accommodations you need to participate in a program for which you have registered.

### Geneva Park District Waiver and Release of All Claims

The Geneva Park District (the "Park District") is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program/activity must recognize that there is an inherent risk of injury when choosing to participate in recreational activities. You are solely responsible for determining if you or your minor child/ward are physical fit and/or adequately skilled for recreational activities. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

### WARNING OF RISK

Recreational activities are intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity. Depending on the particular activity, certain risks and dangers may exist due to inclement weather, slips and falls, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, lack of safety equipment, inadequate or defective equipment, failure in supervision and instruction or officiating, and premises defects. It is impossible for the Park District to guarantee absolute safety.

### WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in the Program(s), you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with the program(s)/activity(ies) (including transportation services, when provided). I recognize and acknowledge that there are certain risks of physical injury to participants in the program(s)/activity(ies), and I voluntarily agree to assume the full risk of any injuries, damages or loss, regardless of severity that my minor child/ward or I may sustain as a result of participating in any and all activities connected with or associated with the program(s)/activity(ies). I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Park District, including its officials, agents, volunteers and employees (hereinafter collectively referred to as "Parties"). I do hereby fully release and forever discharge the Parties from any and all claims for injuries, damages or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with the program(s)/activity(ies). I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature. I understand that my child/ward or I may be photographed or videotaped while participating in a Park District program. I give permission for photos and video images of my child/ward or me to be used to promote the Park District's recreation programs. Such photos and video images remain the property of the Park District. **PARTICIPATION WILL BE DENIED if the signature of adult participant or parent/guardian and date are not on this waiver. Photo/Video Disclaimer:** All participants permit the taking of photos and/or video of themselves and their children during Park District activities, programs, events, and facilities for publication and use as the Park District deems necessary in marketing materials. If you and your child do not wish to be photographed or videotaped, a written objection must be filed with the Park District.

### PAYMENT

Please indicate your choice of payment:

☐ Check ☐ Cash ☐ Credit Card

Card Number

Expiration Date

**NOTE:** Faxed registration must be paid by credit card. When registering by fax, it is mutually understood that the facsimile registration documents (including the waiver & release of all claims) shall substitute for and have the same legal effects as the original form.

### SIGNATURE

I have carefully read the Insurance Liability waiver on this form and understand that my signature is required below in order for myself or my child/ward to participate in the Geneva Park District programs. My signature also authorizes payment via the credit/debit card number if provided for payment.

Signature of Participant, Parent or Guardian  
and Credit/Debit Card Holder if applicable \_\_\_\_\_

Date \_\_\_\_\_

### PLEASE NOTE:

Bring a sack lunch and snacks daily. Unless otherwise notified.

Institute Days and School Holidays are not included in the Kids' Zone installment plan, but may be registered for separately.

Your credit card will be charged when you submit this registration form.

Please see above for registration deadlines. Phone registration are **not** available for Day Off Fun Zone.



Office Use Only	Prepared by:	Date:	Amount:	Pmt Method:
	Copy given to:	for:	Special Needs Personal Training Priv. Lesson RB/WB League Other	