



## Geneva Park District Program Registration Sunrise & Sunset Dance Company

710 Western Ave., Geneva, IL 60134 630-232-4542 Fax 630-232-4569

[www.genevaparks.org](http://www.genevaparks.org)

Last Name \_\_\_\_\_ (Adult) First Name \_\_\_\_\_

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

Home Phone No. \_\_\_\_\_ Cell / Other Phone No. \_\_\_\_\_

E-mail \_\_\_\_\_ Work Phone \_\_\_\_\_

**\*Please note: Monthly fee includes weekly practices only; Costume & Competition fees are extra.**

| Participant's Name | Birth Date | Age/ Grade | Resident or Non Resident | Program  | Monthly Fees<br>(September 1, 2025 through July 1, 2026) |
|--------------------|------------|------------|--------------------------|--|--|
|                    |            |            |                          | Sunrise Dance Co.<br>(ages 5-7yrs)<br>4210329-04 | \$57 per month – Res<br>\$64 per month – NR              |
|                    |            |            |                          | Sunset Dance Co.<br>(ages 7-18yrs)<br>4210329-03 | \$67 per month – Res<br>\$74 per month – NR              |

**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.

### SIGNATURE

I have carefully read the Insurance Liability Waiver on the reverse side of 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 above for the payment. **I authorize the Geneva Park District to charge the credit card listed above for the Sunrise & Sunset Dance Company program payments the first day of each month beginning September 1, 2025 through July 1, 2026 (for a total of 11 payments). If you withdraw from the program, the charges will stop. PARTICIPATION WILL BE DENIED if the signature of adult participant or parent/guardian and date are not on this waiver.**

**Payment Authorization** Credit/Debit: MasterCard Visa Discover Am-Ex

Card # \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

Print Name as it appears on card \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_

**Payment Options:** ☐ Pay in full ☐ EZ Pay—automatic monthly payments from a debit or credit card

**Please note: we cannot split payments between multiple credit cards or family members.**

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

|                 |                |                    |         |             |
|-----------------|----------------|--------------------|---------|-------------|
| Office Use Only | Prepared by:   | Date:              | Amount: | Pmt Method: |
|                 | Copy given to: | for: Special Needs |         |             |

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

### **IMPORTANT INFORMATION**

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 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.