

Maides Park General Registration Form & Waiver

Please check the programs you are registering for below:

Kids Night out Ultimate Teen Time Zumba Yoga Senior Fit Other

Note* If you are not signing up youth for any programs, fill out the information below and sign the waiver on the back of this form:

Persons over 18, Parent, Guardian:

Name: _____

Address: _____

City: _____ Zip: _____

E-mail : _____

Phone # _____

Emergency Phone # _____

Note* If registering youth under the age of 18 for any programs, please fill out all necessary information below, along with the waiver on the back:

Youth #1 Name: _____ Date of Birth: ____/____/____

Youth #2 Name: _____ Date of Birth: ____/____/____

Youth #3 Name: _____ Date of Birth: ____/____/____

Youth #4 Name: _____ Date of Birth: ____/____/____

Youth #5 Name: _____ Date of Birth: ____/____/____

Youth #6 Name: _____ Date of Birth: ____/____/____

PLEASE READ CAREFULLY BEFORE SIGNING

I declare that I/the child(ren) are physically fit and have the skill level required for participating in the program activities. I further authorized medical treatment for myself/the child(ren), at my cost, if the need arises. In consideration of my/the child(ren)'s participation, I hereby release and hold harmless the City, its agents, officers, employees and volunteers from and against any and all claims, demands, causes of action or other liability on account of damages to persons or property arising out of my/the child(ren)'s participation in the above programs, including but not limited to, riding in the City's vehicle. I have read and understand the above.

I further authorize the City of Wilmington and/or representatives of the news media or others authorized by the City to make photographs, films, videotapes and sound recordings of me/the child(ren) or conduct an interview with the same, and use the photographs, films, videotapes, sound recordings and interviews in any form for their purposes. I consent that said photographs, film, videotapes, sound recordings and interviews may be copied, published, telecast or broadcast for such purposes as the City or such media and others see fit together with descriptions, copy and editorial statements.

All photographs, films, videotapes, sound recordings, interviews, including descriptions, copy and editorial comments, if any, shall be and remain the property of the City of Wilmington and/or the media company or others employed or authorized by the City. I waive any and all consideration, compensation or remuneration for the use of said photographs, films, videotapes, sound recordings and interviews, and I transfer and convey to the City or its authorized media company or others authorized by the City any rights I may have in and to same.

If participant is over the age of 18 and participating in program activities, please sign below:

Signature of Participant (if over age 18) Printed Name Date

If participant is under the age of 18 and participating in program activities, a parent or guardian must sign below:

Signature of Parent or Guardian Printed Name Date

Maides Park

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