

Algonquin Recreation Registration Form

Directions: All registration forms must be complete and include full payment.
Checks must be made payable to the **Village of Algonquin**. Incomplete registration forms may delay processing.

Head of Household Information *(please print legibly)*

First Name:	Last Name:
Date of Birth:	Gender:
Street Address:	City, State, Zip Code:
Home Telephone Number:	Cell Phone:
E-mail Address:	

Emergency Contact Information *(please print legibly)*

Emergency Contact Name:	Emergency Contact Telephone:
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Participant Registration Information *(please print legibly)*

Participant's First Name	Date of Birth (Mo/Day/Year)	Gender (Male or Female)	Course Title/Level or Membership Type	Course Code	Course Fee

Youth Fee Assistance Program Optional Donation *(circle one)* \$5 \$10 \$15 \$20 Other

Total *(Please make check payable to Village of Algonquin)*

ADA Compliance: The Village of Algonquin intends to comply with the intent and spirit of the Americans with Disabilities Act. If you or your child needs special accommodations, please circle the answer below, and contact the Village at (847) 658-2716 to make arrangements for you or your child. Inclusion Request Forms can be found online at www.algonquin.org/recreation. If special accommodations are needed, please submit completed registration at least two weeks prior to start date.

Does the participant have special needs: Yes No

In case of MEDICAL EMERGENCY, I authorize Village of Algonquin personnel to take such emergency action as may be deemed necessary.

Please read this form carefully and be aware that enrolling and participating in any program/course/activity, 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 this program/course/activity.

I recognize and acknowledge that there are certain risks of physical injury associated with participating in this program/course/activity, and I voluntarily agree to assume the full risk of any injuries, damages, or losses, regardless of severity, that I or my minor child/ward may sustain as a result of such participation. I fully understand and agree that all programs/courses/activity shall be at my or my minor child/ward's sole risk. I further agree to waive and relinquish all claims I or my minor child/ward may have or which may occur to me and/or my minor/ward as a result of participation in this program/course/activity. I do hereby fully release and forever discharge the Village of Algonquin from any and all claims for injuries, damages, or loss that I or my minor child/ward may have or which may occur to me or my minor child/ward and arising out of, connected with, or in release of all claims. I do hereby fully release the Village of Algonquin to take photos or video imaging of the activity(s) that I or my minor child/ward am participating in for future use as the Village deems necessary.

I have read and understand the Village of Algonquin's refund policy.

Participant or Parent/Guardian Signature

Date

Office Use Only

Date Processed:	Received By:	Amount Processed:	Check Number:
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Additional Notes: