GREYBULL RECREATION DISTRICT 2020 YOUTH CLASS WAIVER AND REGISTRATION

PARTICIPANT'S NAME			
PARENT/GUARDIAN N	AME(S) (If under 18)		
ADDRESS		CITY	
	(W)	EMERGENCY	AGE
CLASSES:			
ANY SPECIAL LIMITAT	TIONS, ALLERGIES, OR M	IEDICAL PROBLEMS?	
HOW WILL THE PART	CIPANT BE GETTING HO		
	periodic e-newsletters, surv	veys and updates regarding Recreation ail address. Please note that we treat a	n District programs. If you would
Email address			
District, the Big Horn Co and suits of law or in ed	ounty School District #3, th Juity for any injury, fatal or District, the School Distric	to participate in the all programs. I re e program instructor(s) and the City of otherwise, while participating in this a ct, and the City of Greybull do <u>not</u> prov	f Greybull from all liability claims activity. Please be advised that
In case of accident or illness, I hereby authorize a representative to use his/her judgment in obtaining immediate medical care. PARENTS WILL BE NOTIFIED IN CASE OF SERIOUS ILLNESS OR INJURY AS QUICKLY AS POSSIBLE; HOWEVER, THIS WILL MAKE IMMEDIATE TREATMENT POSSIBLE.			
photos of myself, of my the Greybull Recreation minor(s) with or withou	minor(s) and my/their pron District. I agree that the Out names for promotional p	its promoters, representatives, and e operty in connection with the program Greybull Recreation District may use su ourposes. These include newsletters, a newspapers for publication. Check he	being held at or sponsored by uch photographs of me or of my and flyers. I also give my
DATE	SIGNED_		

<u>Refund Policy</u>: A full refund will be given when the Recreation District cancels an activity. A refund, less a 25% administrative charge, will be given to all other individuals requesting a refund before the activity or program begins. Participants may transfer the full credit amount towards another program within a two month period from the cancelation date. **No refund will be given, with the exceptions of the conditions stated above, after an activity has started.**