SUMMER CAMPS REGISTRATION FORM

Participant's Name:_____

Birth Date:_____Age_____Sex_____Grade Entering_____School_____

Mother's Name:_____Email:_____

Work phone: ( )_____ Home phone: ( )_____ Cell: ( )_____

Father's Name:_____Email:_____

Work phone: ( )_____ Home phone: ( )_____ Cell: ( )_____

Address:_____

Allergies ? _____

For Planet Bravo & Fire Fighting Camps: T-shirt size: _____

Enclosed Fees: $_____

Method of Payment: ❑ Check Please submit one check per program
(Checks should be made payable to the City of Beverly Hills)
❑ MasterCard ❑ Visa ❑ American Express ❑ Discover

Credit Card#:_____ Expiration Date:_____

Cardholder's Name:_____ Signature_____

REGISTRATION INFORMATION (Please read before signing - see page 18)

WAIVER AND RELEASE, PLEASE READ and SIGN THE FOLLOWING

I hereby agree to indemnify, defend and hold harmless the City of Beverly Hills, and its officers, employees, agents and volunteers, from and against any and all damages, loss, liability, charges, and expenses in any way arising out of my (or my children's) participation in the program for which I am registering. I hereby consent to the photographing, recording and reproduction in any other manner (including use of video and audio) of the likeness, voice and/or activities of the participant and further authorize the City of Beverly Hills, its agents or assigns, to make unlimited use of such reproductions, including but not limited to broadcasting of the reproductions over radio, television and on the Internet. I understand that I will not receive any monetary compensation now or in the future for participating. I do hereby release and hold harmless the City of Beverly Hills, its officers and employees from any claims. I have read and acknowledge the refund policy.

X_____

(Parent/legal guardian signature)

COURSE #	COURSE NAME	SESSION DATES	FEES	ALTERNATIVE COURSE #