



Waunakee Village Center PROGRAM PARTICIPANT FORM

Participant
Number:

NAME
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C
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TELEPHONE
PERSONAL
EMERGENCY
SPECIAL
INFORMATION

First Name Middle Last Name

Street:

City: State: Zip:

Email Address:

Home: Work: Cell:

Date of Birth: Gender: Male Female

Emergency Contact
Name/Relationship/Phone:

Additional Information (allergies, medications, physical limitations, etc.):

FAMILY MEMBERS

<u>First Name, Last if Different</u>	<u>Date of Birth</u>	<u>Gender</u>	<u>Relationship</u>

For program promotion purposes we photograph many of our activities and their participants. Photographs are used in various fliers, brochures, websites and social media. If you do not wish to have your or your child's photo taken, please notify the Village Center when registering.

Signature required on reverse side 



General Recreation Participant

LIABILITY WAIVER AND INDEMNIFICATION AGREEMENT

I fully release and discharge the Village of Waunakee and its officers, agents and employees from any and all claims or damages, including claims and damages arising from injuries, death, or property damage, which may arise out of, or occur in connection with, my use of the Waunakee Village Center or my participation in any of the Village Center's on-site or off-site programs, except for those resulting from the recklessness or willful misconduct of the Village of Waunakee or its officers, agents and employees.

I further agree to indemnify and hold harmless the Village of Waunakee and its officers, agents and employees from any and all claims or damages and costs or expenses incurred by the Village of Waunakee or its officers, agents and employees, which result from or relate to my use of the Waunakee Village Center or my participation in any of the Village Center's on-site or off-site programs, except for those resulting from the recklessness or willful misconduct of the Village of Waunakee or its officers, agents and employees.

My electronic signature below indicates that I have read, understood and agree to the conditions of this agreement.

SIGNATURE _____

DATE _____

04-02-2019