

# CDRC Registration Form

Form must be completed and signed before child begins a program.

Please print clearly and fully

## Participant One:

Child's Name:	Age:	Circle One Babysitting / Home Alone
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Cost: \$
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\*Please list any medical conditions that we should be aware of:

## Participant Two:

Child's Name:	Age:	Circle One Babysitting / Home Alone
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Cost: \$
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\*Please list any medical conditions that we should be aware of:

## Participant Three:

Child's Name:	Age:	Circle One Babysitting / Home Alone
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Cost: \$
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\*Please list any medical conditions that we should be aware of:

**Total Cost:** \_\_\_\_\_

**Address:** \_\_\_\_\_ Street \_\_\_\_\_ Town \_\_\_\_\_ Postal code \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_ **Non Resident User Fee Per Participant:** \_\_\_\_\_

**IN CASE OF EMERGENCY CONTACT:** \_\_\_\_\_ Name \_\_\_\_\_ Phone # \_\_\_\_\_

I hereby release the Centre Dufferin Recreation Complex and its employees from all claims for damages arising from any accident or injury which is caused by, or arises from, participation of the applicant(s) named during any program or in any facility or at any location where a program is held. By enrolling your child in the swimming program, you authorize that any **photographs, motion pictures and/or video recordings taken of him/her participating in a CDRC program may be used by CDRC for the purpose of promotion in our recreation guide, on our social media accounts (Facebook), within our facility and on our website.** These photographs, motion pictures and/or video recordings will be fully owned by CDRC and you won't make any claim against CDRC or the photographer for their use or reason whatsoever. It is understood by the party enrolling the child in the CDRC swimming program that the scope of the Consent is as described above, and that there will be no consideration, monetary or otherwise required from CDRC in exchange for such consent. I also understand that any cheques returned NSF will automatically be issued a \$15 fee.

\_\_\_\_\_  
**Signature of Participant, Parent, or Legal Guardian**

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Staff Signature**