



Program Registration Form & Waiver



Invoice # _____

1 Parent or Adult participants' name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Work phone: _____

2	Participant's Name	Date of Birth	Program Name	Activity Number					-	Section	Fee
Total Fee											

3 Method of payment All major credit cards accepted Make checks payable to: B.O.C.C.

Credit Card #: _____ Expiration date: _____

Cardholder's Signature: _____

4 Mail in, Phone in or Drop off:

Terry Park - 3410 Palm Beach Blvd. Fort Myers, FL 33916 (239) 533-7275
 Estero Recreation Center - 9200 Corkscrew Palms Blvd. Estero, FL 33928 (239) 498-0415
 North Ft Myers Recreation Center - 2000 North Recreation Park Way, North Ft Myers, FL 33903 (239) 533-7200
 Veterans Park Recreation Center - 55 Homestead Rd. Lehigh Acres, FL 33936 (239) 369-1521
 Wa-ke Hatchee Recreation Center - 16760 Bass Rd. Fort Myers, FL 33908 (239) 432-2154

Online (Credit card only): www.LeeParks.org

Lee County Parks and Recreation reserves the right to deny registration to any program and charge fees where applicable. The applicant must adhere to all Lee County ordinances and Parks & Recreation policies. Participant waiver form must be completed annually, please make sure you have a current waiver on file.

LEE COUNTY PARKS AND RECREATION PARTICIPANT WAIVER FORM

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK FOR LEE COUNTY PARKS AND RECREATION PROGRAMS/ACTIVITIES PLEASE READ THIS FORM CAREFULLY and be aware that in signing up and participating in Lee County Parks and Recreation program/activities, 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 Lee County Park programs/activities (including transportation services/vehicle operation, when provided). I recognize and acknowledge that there may be certain risks involved in participating in park programs/activities, and I voluntarily agree to assume the full risk of any injuries, damages or loss, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in such program/activity against the County, including their respective officials, officers, employees, and volunteers (hereinafter collectively referred as "Parties"). I do hereby fully release and forever discharge the Parties from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with these programs/activities.

I indemnify and hold harmless Lee County, any of its employees and/or agents from any and all claims from my use of county property or participation in any county programs. I will further indemnify and "hold harmless" the County, its employees and/or agents from all costs, expenses and liabilities resulting from any claim brought from my child's/children's use of county property and/or participation in county programs to the extent of the County's liability under general law.

I hereby grant permission for myself or my child to be photographed or recorded in connection with any Lee County Parks and Recreation Promotion. I understand that any photographs or other types of media production may be used for purposes, including but not limited to, public service announcements, department brochures, and other programs shown to the general public.

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above and, for myself, my heirs, assigns, and my minor child(ren)'s involvement or participation in the program as provided above.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering via fax, your facsimile signature shall be substitute for and have the same legal effect as an original form signature.

PARTICIPANT'S SIGNATURE _____ PRINT NAME OF PARTICIPANT _____

DATE _____

MINOR(S) NAME(S) _____

SIGNATURE OF PARENT OR GUARDIAN _____ WITNESS _____

(Printed Name) PARENT OR GUARDIAN _____ DATE _____