

# JUNIOR PROGRAM REGISTRATION FORM

Participants must fill out both sides to complete enrollment.

## PARTICIPANT 1

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Phone: \_\_\_\_\_

Class: \_\_\_\_\_ Session: \_\_\_\_\_ Cost: \_\_\_\_\_

Camp: \_\_\_\_\_ Session: \_\_\_\_\_ Cost: \_\_\_\_\_

CSBA: \_\_\_\_\_ Session: \_\_\_\_\_ Cost: \_\_\_\_\_

## PARTICIPANT 2

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Phone: \_\_\_\_\_

Class: \_\_\_\_\_ Session: \_\_\_\_\_ Cost: \_\_\_\_\_

Camp: \_\_\_\_\_ Session: \_\_\_\_\_ Cost: \_\_\_\_\_

CSBA: \_\_\_\_\_ Session: \_\_\_\_\_ Cost: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_

Email Address: \_\_\_\_\_ (NOT used for outside purposes)

## PAYMENT

Member/Cardholder Name (please print): \_\_\_\_\_

House Account     Cash     Check (# \_\_\_\_\_)

Credit Card (VISA or MasterCard)

Member/Credit Card Number: \_\_\_\_\_ Expiration (credit card): \_\_\_\_\_

Member Signature: \_\_\_\_\_

How did you hear about this program? \_\_\_\_\_

## JR. PROGRAMMING POLICIES

- 1. For monthly billed programs, cancellations must be submitted in writing to the Activities Desk prior to the 3rd Friday of the month. For all other non-monthly billed programs, cancellations need to be made with more than 24 hours notice in order to receive a refund.**  
Please visit the Activities Desk to complete our official cancellation notice form and obtain a cancellation receipt.
2. No refunds or credits are given 60 days after class date.
3. Parents need to be present upon check-in/out each day.
4. If emergency contact information has changed since completion of registration form, please provide new information to the Activities Desk.

## HOW TO REGISTER

**At the Club:** Visit the Activities desk during office hours, or turn in registration form to the Service Desk.

**By Fax:** Please fill out registration completely with credit card information, including signature of cardholder. Call the Activities Desk to confirm fax was received. Phone: 503.968.4555; Fax: 503.968.4531. You will be contacted via phone with confirmation of camp registration.

\* Waiver on back side of registration form must be completed at time of registration.

# CLUBSPORT PARTICIPANT RELEASE AND WAIVER OF LIABILITY

Please Read Entire Form Before Signing

The undersigned hereby certifies that I am the legal parent/guardian of \_\_\_\_\_, a minor participant in the following ClubSport activities/services/program(s): \_\_\_\_\_

In consideration of being allowed to participate in any way in ClubSport's services and activities (including, but not limited to, athletic, sports, aquatics, grad nights, tanning, camp and child care services and activities), and any related events and activities, the undersigned:

1. The undersigned agrees that he or she, as the parent or legal guardian of the aforementioned minor participant, will inspect the facilities and equipment used prior to minor participant's participation, or will instruct the minor participant that prior to participating he or she should inspect the facilities and equipment to be used, and if I or the participant believes anything is unsafe, I or he/she should immediately advise the coach, counselor, instructor or supervising ClubSport employee of such condition(s) and refuse to participate.
2. The undersigned agrees that he or she, as the parent or legal guardian of the minor participant, will instruct the minor participant that he or she must adhere to ClubSport's Rules of Conduct (as published in its Member Handbook and Membership Agreement) at all times when participating in any ClubSport activity.
3. Agrees that any damages caused by the participant will be paid by the undersigned to the owner(s) of the damaged item(s).
4. Represents that the participant has medical coverage and has been released to participate in activities noted above by his/her personal physician and understands that in the event of a medical emergency, the undersigned or the listed emergency contact person will be notified immediately, and if neither are available for consultation, grants permission to the ClubSport staff to obtain medical treatment as deemed necessary.
5. ACKNOWLEDGES AND FULLY UNDERSTANDS THAT IN CERTAIN CLUBSPORT PROGRAMS, THE PARTICIPANT MAY ENGAGE IN ACTIVITIES THAT INVOLVE A RISK OF SERIOUS INJURY, INCLUDING PERMANENT DISABILITY AND DEATH, AND SEVERE SOCIAL AND ECONOMIC LOSSES WHICH MIGHT RESULT NOT ONLY FROM HIS OR HER OWN ACTIONS, INACTIONS OR NEGLIGENCE, BUT THE ACTION, INACTION OR NEGLIGENCE OF OTHERS, THE RULES OF PLAY, OR THE CONDITION OF THE PREMISES OR OF ANY EQUIPMENT USED, AND THAT WHILE PARTICULAR RULES, EQUIPMENT AND PERSONAL DISCIPLINE MAY REDUCE THIS RISK, A RISK OF SERIOUS INJURY STILL EXISTS. (initial\_\_\_\_\_)
6. ASSUMES ALL THE FOREGOING RISK AND ACCEPTS PERSONAL RESPONSIBILITY FOR THE DAMAGES WHICH MAY RESULT FROM SUCH INJURY, PERMANENT DISABILITY OR DEATH.
7. RELEASES, WAIVES, DISCHARGES Leisure Sports, Inc./ClubSport, its affiliate clubs, their respective administrators, officers, directors, agents, coaches, and other employees of the organizations, representatives, other participants, sponsoring agencies, sponsors, advertisers, and any owners and lessors of premises used to conduct the activities and events, all of which are hereinafter referred to as "Releasees", FROM ANY AND ALL LIABILITY to each of the undersigned, his or her heirs, next of kin, executors, administrators and assigns FOR ANY AND ALL CLAIMS, DEMANDS, LOSSES OR DAMAGES ON ACCOUNT OF INJURY, INCLUDING DEATH OR DAMAGE TO PROPERTY, WHETHER FOUNDED IN LAW OR FACT, CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
8. Understands that this waiver and release is intended to be as broad and inclusive as permitted by the laws of this state and that if any portion of this waiver and release is held invalid, the balance shall continue in full legal force and effect.
9. Understands that ClubSport is relying upon this waiver and release in agreeing to provide services and activities for the participant and that the terms set forth in this waiver and release are contractual and legally binding.

I, \_\_\_\_\_, HAVE READ THE ABOVE WAIVER AND RELEASE. I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGNING VOLUNTARILY.  
(print name of parent/guardian)

Signature of Participant \_\_\_\_\_ Date \_\_\_\_\_  
Signature of Participant's Parent or Guardian if Participant is under 18 \_\_\_\_\_ Date \_\_\_\_\_  
Home Number \_\_\_\_\_ Work Number \_\_\_\_\_ Cell Number \_\_\_\_\_  
Emergency Contact \_\_\_\_\_ Number they can be reached at \_\_\_\_\_  
Participant's Name(s) \_\_\_\_\_ Age(s) \_\_\_\_\_  
Allergies, or any other health conditions, if any \_\_\_\_\_

## Jr. Program Class Policies & Registration

### Members:

For payment and registration, please include your member number or credit card information with your registration form. Checks and cash are not accepted. To authorize charges to your account, please indicate on the registration form.

### Guests and Corporate Accounts:

For payment and registration please include a credit card number with registration. Checks and cash are not accepted.

Pro-rated tuition is only granted on a mid-month initial registration for class. No credits will be given for non-attendance. If you cancel a class mid-month, you will be charged the full monthly rate. Your specified account will be automatically charged on the 3rd Friday of each month for the following month's tuition.

Jr. Program instructors will attempt to get a substitute or schedule a make-up class when ill or on vacation. If the instructor is unable to get a sub, your monthly tuition will be pro-rated.

Enrollment and charges in ongoing Jr. Program classes has an automatic roll over to the next month unless written notice to withdraw from class is given to the Activities Desk. At that time, you will be issued a cancellation receipt.

Enrollment in limited term classes are paid for in full at registration. To cancel these limited term classes, cancellation must be done in writing at the Activities Desk with more than 24 hours before initial class start date. At that time, you will be issued a cancellation receipt.

Please consider that many classes may have waiting lists of students seeking enrollment. We do also reserve the right to cancel classes based on low participation at which point a full refund will be issued.