

**SPORTS/KARATE
PRIVATE LESSONS
REGISTRATION FORM**



Romeoville Recreation Department • 900 W. Romeo Rd., Romeoville, IL 60446 • (815) 886-6222 • www.romeoville.org

This form needs to be completed to request private lessons. Please submit this form to the Recreation Department. Once this form is received, someone will be in contact with you to schedule days and times. If you are unable to attend a paid lesson, it is your responsibility to contact Nick Cronin at 815-886-6234 or ncronin@romeoville.org, 24 hours prior to agreed lesson, otherwise scheduled lesson will not be made up or rescheduled.

TODAY'S DATE : _____ ACTIVITY REQUESTED FOR LESSON(S) (PARTICIPANT MUST BE 8 OR OLDER):
KARATE _____ BASKETBALL _____ VOLLEYBALL _____ SPORTS FITNESS _____

HOUSEHOLD INFORMATION:

FIRST NAME : _____ LAST NAME : _____ GENDER: M F

(PRIMARY GUARDIAN)

(PRIMARY GUARDIAN)

BIRTHDAY : _____ PRIMARY PHONE : _____ SECONDARY PHONE : _____
(MONTH/DAY/YEAR) TYPE: HOME CELL WORK TYPE: HOME CELL WORK

PRIMARY EMAIL: _____

ADDRESS : _____ CITY : _____ STATE : _____ ZIP CODE : _____

Refunds for programs will be sent to the head of household at the above address only.

PARTICIPANT INFORMATION:

PARTICIPANT'S NAME : _____ GENDER: M F BIRTHDAY : _____
(FIRST/LAST NAME) (MONTH/DAY/YEAR)

PREVIOUS PROGRAM(S) ENROLLED IN: _____

Please list any special needs, allergies, or important medical information.

PLEASE INDICATE HOW MANY LESSONS YOU WOULD LIKE TO PURCHASE:

A) 1-4 LESSONS (FEE: \$25 RESIDENT / \$38 NON-RESIDENT PER LESSON) : _____ X _____ = _____
(# OF LESSONS) RATE (\$25R/\$38NR) TOTAL

B) 5-10 LESSONS (FEE: \$20 RESIDENT / \$30 NON-RESIDENT PER LESSON) : _____ X _____ = _____
(# OF LESSONS) RATE (\$20R/\$30NR) TOTAL

*Proof of residency is required in order to receive Resident rates.

REQUESTED DAY(S) (MON-FRI) : _____ REQUESTED TIME(S) : _____

*REQUESTED DATES/TIMES ARE NOT GUARANTEED AND DEPENDANT UPON INSTRUCTOR AVAILABILITY.

SPECIFIC SKILLS PARTICIPANT WANTS TO LEARN AND DEVELOP :

EMERGENCY CONTACT INFORMATION:

FIRST NAME : _____ LAST NAME : _____

RELATION : _____ PRIMARY PHONE : _____ TYPE: HOME CELL WORK

Over - this form must be turned in with a signature. Forms without signatures will not be processed. Please see other side for participation waiver

OFFICE USE:

ROMEVILLE RECREATION DEPARTMENT --PARTICIPANT AGREEMENT

NOTE: THIS AGREEMENT MUST BE SIGNED BY ALL ADULT PARTICIPANTS AND MUST ALSO BE SIGNED BY A PARENT OR GUARDIAN OF ANY MINOR SEEKING TO PARTICIPATE IN ANY RECREATION DEPARTMENT PROGRAMS OR ACTIVITIES.

WARNING OF RISK

Despite the implementation of all reasonable precautions by the Department, an unavoidable risk of serious injury will always exist when participating in any recreational activity. Not all hazards and dangers can be foreseen. Participants and parents/guardians of minor participants must understand that certain risks and hazards will be inherent to participation in that activity, including but not limited to risks and hazards associated with inclement weather, slip and falls, overexertion and fatigue, disregarding safety rules and instructions, collision with stationary objects or other participants, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating. Additionally, participants and parents/guardians of minor participants are further expressly informed that any program or activity involving the presence of or interaction with other persons can carry the risk of the transmission of disease between such persons, including but not limited to the COVID-19 virus. Accordingly, the Department hereby informs all participants and parents/guardians of minor participants that it is impossible for the Romeoville Recreation Department to guarantee absolute safety for all program and activity participants, or to guarantee that programs and activities are free from the risk of the transmission of disease, including but not limited to the COVID-19 virus.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

I acknowledge and assume the risks of property damage, accidents, injuries (including death), loss of bodily functions, transmission of disease (including but not limited to the COVID-19 virus), disabilities, medical disorders, pain and suffering, lost income and medical expenses that arise from participation in any program or activity offered by the Department, and my use of facilities, transportation services, premises and equipment provided by the Department. I further acknowledge that the foregoing risks may arise from my own action or inaction, the actions or inaction of other program or activity participants, the conditions under which a program or activity is conducted, or from the negligent actions or inaction (including any failure to warn) of Department personnel, contractors or service providers. I also acknowledge that from time to time, the Village of Romeoville and/or the Department may take photographs of me participating in programs or activities offered by the Department for use and publication in various publications or media, including but not limited to the Village’s website, Facebook account or other social media sites or accounts, department program brochures or materials, and Village or Department informational, promotional or marketing materials, and I hereby expressly grant to the Village of Romeoville and the Department the right to use and publish such photographs as contemplated herein, all without compensation or payment for such use and publication. In consideration of being allowed to participate in programs or activities offered by the Department, or to use facilities, transportation services, premises and equipment provided by the Department, I hereby release, waive and discharge the Village of Romeoville and its officers, officials, employees, agents, volunteers and contractors (collectively, the “Releasees”) from any and all liability and all claims of any kind whether for personal injury, transmission of disease (including but not limited to the COVID-19 virus), property damage or death, arising from participation in any activity or program offered by the Department, arising from my use of facilities, transportation services, premises and equipment provided by the Department, or arising from the use or publication by Releasees of photographs of me participating in programs or activities offered by the Department, whether or not caused by the negligence of the Releasees or any of them and further covenant that I shall not sue any of the Releasees with respect to any such liability or claims. In the event that I or anyone else nonetheless makes a claim or files suit against Releasees arising out of any of the above-described matters, I will indemnify and hold Releasees harmless of and from any and all damages or judgments and costs of litigation, including attorney fees. The provisions hereof are to be construed as broadly as possible in favor of Releasees, and this Agreement as a whole shall be governed by the laws of the State of Illinois (without reference to the conflicts of laws rules thereof). If any part of this Agreement shall be ruled invalid by a court having jurisdiction, the balance shall be enforced to the maximum possible extent. I am signing this Agreement freely and voluntarily, having read and understood it and with a full opportunity to consider its substance and with the intention of fully and unconditionally assuming the risks and releasing the liabilities as described above in this Agreement.

DATE: _____ (Printed Participant Name) _____ (Participant Signature)

REQUIRED PARENT/GUARDIAN SIGNATURE FOR MINOR PARTICIPANTS

I am the parent or legal guardian of _____, and am registering _____ to participate in a program or activity offered by the Romeoville Recreation Department. I have read and reviewed this Agreement, and am voluntarily signing it on behalf of my child/ward _____, in my capacity as parent and legal guardian. By signing below, I am agreeing on behalf of my child/ward to be bound along with my child/ward by all terms and conditions of this Agreement as set forth above, including but expressly not limited to those terms and conditions pertaining to the taking of photographs of program and activity participants, the use and publication of such photographs and the release of all claims associated therewith. If registering online, my online signature will be substituted for and have the same legal effect as an original hard copy signature.

DATE: _____ (Printed Participant Name) _____ (Participant Signature)