

City of Ukiah

Registration Form

Three Easy Ways To Register:



By Mail:

Send your completed form to:
 City of Ukiah
 Recreation Classes
 411 W. Clay St.
 Ukiah, CA 95482



By Fax:

If you are paying with a credit card, you can fax the completed form to:
 (707)463-6740



In Person:

Forms may be delivered directly to the City of Ukiah from 8:00am - 5:00pm, Monday - Friday
 411 West Clay St.

Last Name, First	D.O.B	M/F	Course Title	Date & Time	Fee
Refunds are granted only if a written request is received by the City of Ukiah before the second class meeting. There is a 15% administrative fee deducted from all refunds.				\$4.00 Non-Resident Per Course Fee	
				Total	

RELEASE FROM LIABILITY AND INDEMNIFICATION

Please Read and Sign

In consideration of the acceptance of my application for entry into the above stated recreation activity(ies), I hereby waive, release, and discharge any and all claims for damages for personal injury or property damage or losses, expenses, including reasonable attorney fees, which I may have or which may hereafter accrue to me, against the City of Ukiah as a result of my participation in the activity(ies). This release is intended to discharge the City of Ukiah, its officers, officials, employees, instructors, agents, and volunteers, from and against any and all liability arising out of or connected in any way with my participation in the activity(ies) even though that liability may arise out of the negligence or carelessness on the part of other persons. I further understand that accidents and injuries can arise out of the activity(ies), knowing the risks, nevertheless, I hereby agree to assume those risks and to release and to hold harmless the City of Ukiah and all of the persons mentioned above who might otherwise be liable to me or my heirs or assigns for damages. It is further understood and agreed that this waiver, release and assumption of risks is to be binding on my heirs and assigns.

I, the undersigned or parent/guardian of the individual named below do hereby agree to allow the individual named herein to participate in the aforementioned activity, and I further agree to indemnify and hold harmless the City of Ukiah and its instructors, agents, officers and employees from and against any and all liability resulting in injury associated with that individual's participation in this activity(ies).

I/We agree to allow use of my/our photograph for program publicity. I/We read and agree to the registration and program policies. I have read and understand the previous paragraphs.

Signature _____ Date _____

Parent's Signature Required if Under 18

Print Name _____

Mailing Address _____ City _____

Day Phone _____ Night Phone _____

E-Mail Address: _____

Person to Notify in Case of an Emergency:

Name _____ Phone _____

For Official Use Only:

Amount Paid:\$ _____ Payment Method: _____

CREDIT CARD PAYMENT

VISA MASTERCARD NUMBER

NAME (AS IT APPEARS ON CARD)

SIGNATURE:

RECREATION 100.0700.521.001

EXPRITION DATE

AMOUNT \$

DATE

PHONE #