PARADISE RECREATION AND PARK DISTRICT

REGISTRATION APPL	ICATION - PLEA	SE PRINT		
PROGRAM	DATES		NO REFUND AFTER	
OCATION			NOTES	
OCATION			NOTES	
CLASS DAY(S)	TIME	FEE	EMAIL ADDRESS	
IAME OF PARTICIPANT			BIRTHDATE (IF UNDER 18) AGE GRADE	SI
AIVIE OF FARTICIPANT			BINTIDATE (IF UNDER 10) AGE GRADE	31
DDRESS	CITY	ZIP	TELEPHONE	-
ARENT'S NAME (IF PARTICIAPANT IS A MINOR)			DAYTIME TELEPHONE	
ADDITIONAL NAME IN CASE OF EMERGENCY		EMERGENCY TELEPHONE		
ADDITIONAL INFORMATION		THIS SPACE FOR OFFICE USE ONLY		
			CHK # CASH	
			AMOUNT PAID	
			DATEBY	
IF YOU CANCEL A 20% PROCESSING FEE WILL BE CHARGED		ACCT #		
n consideration for being pactivity, I hereby waive, releasoroperty damage which I mactivity. This release is intofficers, employees, and a	ermitted by the Paradis ase, and discharge an ay have, or which may ended to discharge in gents) from any and al	se Recreation are y and all claims hereafter accruded advance the Particular advance the Ill liability arising	nd Park District to participate in the after damages for personal injury, dealer to me, as a result of participation in a radise Recreation and Park District out of or connected in any way with pagligance or pagl	ath, n s ct th
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To register for class by mail, complete the registration application; PRINTING in ink, all requested information. Be sure to sign the bottom of the form. Return the completed application along with payment to Paradise Recreation and Park District, 6626 Skyway, Paradise, CA 95969. Payment should be made by check, payable to "PRPD". To complete the registration process you must include a self-addressed stamped envelope so we can return your receipt and registration confirmation. Mail-in registration will be accepted after those persons registering in person and does not guarantee program

> PARADISE RECREATION AND PARK DISTRICT 6626 Skyway, Paradise, California 95969

enrollment.