

<p>Mt. Park HOA Official Use Only Received By: _____ Receipt #: _____</p>
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Spring Specialty Class Registration

Participant Information

Participant's Name _____ Member Non-Member

Address: _____
STREET CITY STATE ZIP CODE

Parent/Guardian Name: _____ Contact Phone Number: _____

Participant's Birthdate: ___/___/___ Age: _____ E-mail: _____

Commitment & Cancellation

Commitment Agreement:
 I understand that it is the participant's responsibility to follow instructions, behave positively, and be an active member of all program activities. I understand and support the commitment that the participant has made in choosing to attend programming.

- Refund/ Cancellation Policy:**
- Failure to adhere to program policies is cause for dismissal with no refund of fees.
 - A complete refund/credit will be given if written notification of cancellation is given at least two weeks prior to the start of the program.
 - No refund/credit will be given if a participant leaves a program early for any reason; if participant cancels within two weeks of the start of the program; if a participant does not show up for the program.
 - Refunds/credits will be given for medical or death with the proper paperwork provided to Mt. Park. Once paperwork is given to Mt. Park the refund will then go forward with processing.
 - No refunds/credits will be given for any reason after 3 months' post purchase of item, event or program.

Waiver & Release

In participating in all recreational programs and events sponsored by the Mountain Park Home Owners Association, I hereby acknowledge that I understand there are risks of accidents resulting in bodily harm arising out of those activities. I understand that the recreation activities are planned with the safety of the participants in mind. I further acknowledge that my child has the physical capacity reasonably necessary to engage in recreation activity for which I have enrolled them. In case of emergency, accident, or illness, I give permission for my child to be treated by a professional medical person and admitted to a hospital if necessary. I agree to be the party responsible for all medical expenses which are incurred in their behalf. It is understood and agreed that the Mountain Park Home Owners Association, Boards, employees, volunteers, and agents be held harmless against all claims, damages, loss or expenses including attorney fees arising out of or resulting from their participation in recreation programs.

****I have read the above information above, and by signing below agree to all terms and conditions. ****

Signature: _____ Date: _____
My electronic signature authorizes my understanding of this information.

Registration closes the day before the class starts

Please circle which class and time you would like to enroll in.

Advanced Swim Club on Mondays and Wednesdays 4:30pm-5:30pm		
March 4-20	Member Rate: \$45	Non-Member Rate: \$52.50

Advanced Swim Club on Mondays and Wednesdays 4:30pm-5:30pm		
April 1-29	Member Rate: \$60	Non-Member Rate: \$70

Advanced Swim Club on Mondays and Wednesdays 4:30pm-5:30pm		
May 1-29	Member Rate: \$60	Non-Member Rate: \$70

Beginning Swim Club 4:30pm-5:30pm		
March 5-21	Member Rate: \$60	Non-Member Rate: \$70

Beginning Swim Club 4:30pm-5:30pm		
April 1-29	Member Rate: \$60	Non-Member Rate: \$70

Beginning Swim Club 4:30pm-5:30pm		
May 2-30	Member Rate: \$60	Non-Member Rate: \$70

Playschool		
9:00am-11:30am (30-minute classes)	April 2 nd – June 11 th	\$88 for 11 classes

Parent and Child Swim Lesson		
May 4-25	Member Rate: \$40	Non-Member Rate: \$55