

Mt. Park HOA  
 Official Use Only  
 Received By: \_\_\_\_\_  
 Receipt #: \_\_\_\_\_



**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**

*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**

- Refund/ Cancellation Policy:*
- Failure to adhere to program policies is cause for dismissal with no refund of fees.
  - No make-ups, refunds, or credits for unexpected pool closures or weather-related closures.
  - Classes with less than 2 participants will be cancelled.
  - We reserve the right to make any changes to the schedule at any time up to and during a session.

**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: \_\_\_\_\_  
*By typing my name, I am electronically signing this document. I understand that an electronic signature has the same legal effect and can be enforced in the same way as a written signature.*

Please "X" which class you would like to enroll in.

\*Registration closes the day before the class starts\*

<b>BEGINNER SWIM CLUB</b>					
	<b>April 2 – April 30</b>	Tuesday & Thursday	4:30pm-5:30pm	Member: \$60	Non-Member: \$70
	<b>May 5 – May 28</b>	Tuesday & Thursday	4:30pm-5:30pm	Member: \$60	Non-Member: \$70
	<b>June 2 – June 30</b>	Tuesday & Thursday	4:30pm-5:30pm	Member: \$60	Non-Member: \$70

<b>ADVANCED SWIM CLUB</b>					
	<b>April 1 – April 29</b>	Monday & Wednesday	4:30pm-5:30pm	Member: \$60	Non-Member: \$70
	<b>May 4 – May 27</b>	Monday & Wednesday	4:30pm-5:30pm	Member: \$60	Non-Member: \$70
	<b>June 1 – June 29</b>	Monday & Wednesday	4:30pm-5:30pm	Member: \$60	Non-Member: \$70

<b>PLAYSCHOOL SWIM LESSONS</b>				
	<b>March 31 – June 2</b>	Tuesday	9:00am-11:30am (30-minute classes)	\$120