

WEST NORRITON TOWNSHIP – PARKS & RECREATION DEPARTMENT

1630 Marshall Street ~ Jeffersonville, PA 19403 ~ Phone 610-630-1251 ~ Fax 610-630-0304

PROGRAM REGISTRATION FORM



PROGRAM NAME _____

Participant Name _____

Address _____

City _____ State _____ Zip _____

Home Phone # _____ Work No: _____

Cell/Other _____

Mother/Guardian Name _____

Father/Guardian Name _____

Special Considerations: _____

Date of Birth _____

Age _____ Shirt Size _____

Grade _____

School _____

Male Female

Resident Non-Resident

Email Address: (1) _____ (2) _____

MEDIA RELEASE STATEMENT

I, Participant and/or Parent/Legal Guardian of (child's name) _____ hereby grant permission to West Norriton Township, its agents and assigns, to use photos or videos, and likeness for the purpose of promotion by West Norriton Township for all forms, media and manners, for the following, but not limited to, newsletters, photographs, video, audio, website, marketing, advertising, trade, promotion, and exhibition for an indefinite period of time.

I give unrestricted permission for images, videos, and recordings to be used in print, video, digital and internet media. I agree that these images and/or voice recordings may be used for a variety of purposes and that these images may be used without further notifying me. I further acknowledge that I will not be compensated for these uses and the Township owns all rights to the images, videos, and recordings, and to any derivative works created from them.

I waive any right to inspect the uses of any printed or electronic copy. I hereby release the Township and its agents and assigns from any claims that may arise from these uses, including without limitation claims of defamation or invasion of privacy, or infringement of copyright.

This Release expresses the complete understanding of the parties.

By checking this box I acknowledge that I have read and understand the "Media Release" form.

RELEASE FROM LIABILITY

In consideration of _____ (print participant's or minor's name) being permitted by West Norriton Township its agents, officers, employees, and all persons or entities acting in any capacity on their behalf (collectively, the "Township"), to participate in its programs and activities and use its equipment and facilities and facilities of third parties at which the programs and activities are held, I agree to release and discharge the Township, on behalf of myself, my child, my assigns, personal representatives and estate as follows:

1. I acknowledge that participating in the program entails known and unanticipated risks, which could result in physical or emotional injury, paralysis, death or damage to the participant, to property or to third parties. I understand that such risks cannot be

eliminated without jeopardizing the essential qualities of the activity. THE RISKS INCLUDE, BUT ARE NOT LIMITED TO:

- (1) The nature of the activity;
- (2) Latent or apparent defects or conditions in equipment or property supplied by the Township, or other persons or entities;
- (3) Use of property by the participant, others or equipment supplied by the Township, or other persons or entity;
- (4) Acts of other participants in this activity, employees or agents of the Township;
- (5) The participant's physical condition, or own acts or omissions;
- (6) Conditions of the Township facility, property, surrounding grounds or terrain and accidents connected with their use;
- (7) First aid emergency treatment or other services.

2. I expressly agree and promise to accept and assume all the risks existing in this activity. The registrant participating in this activity is purely voluntary and permission has been granted to allow Minor to participate in spite of all risks.

3. I hereby voluntary release, forever discharge, and agree to indemnify and hold harmless the Township, from any and all claims, demands or causes of action which are in any way connected with registrant's participation in this activity or participant's use of the Township's equipment or facilities, including any such claims which allege negligent acts or omissions of the Township.

4. Should the Township, or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this Release from Liability, I agree to indemnify and hold harmless the Township or any such person from all such fees and costs.

By signing this document, I acknowledge that if anyone is hurt, or property is damaged during registrant's participation in this activity, a court of law may find me to have waived my right to maintain a lawsuit against the Township.

I HAVE HAD SUFFICIENT OPPORTUNITY TO READ THIS DOCUMENT. I HAVE READ AND UNDERSTOOD, AND I AGREE TO BE BOUND BY ITS TERMS.

By checking this box I acknowledge that I have read and understand the "Release from Liability" form.

Date: _____

Participant/Parent/Guardian Signature (if under age 18) _____

Cancellation & Refund Policy

West Norriton Township reserves the right to cancel or postpone any program, trip or activity due to insufficient enrollment, inclement weather, or for any other just reason. A program will need to meet its minimum requirement a week prior to the start. Should a cancellation occur, all registered participants will receive a refund of fees within three weeks. ****A \$25.00 Fee will be assessed for all checks returned by your banking institution****