



Registration Form

This form can be copied.
Please print and fill out completely.

Mail to: Program Registration, P.O. Box 95050 MSC 411, Henderson, NV 89009-5050

Parent/Guardian: First Name		Last Name			Birthdate	
Street Address		Apt. #	City	State	ZIP	
Day Phone		Evening Phone		Emergency Phone		Email
Participant 1: First Name		Last Name		Birthdate	Age	Grade/Grade Completed
Gender						

Supporting the Americans with Disabilities Act, if the patron has a physical/ emotional/cognitive disability, call (702) 267-4065.

	Activity #	Activity/Class	Location/Pool/Site	Day/Date	Time	Costs
Class 1	—					
Alternate choice if unavailable	—					
Class 2	—					
Alternate choice if unavailable	—					

City of Henderson Lessee Release And Waiver Of Liability And Disclaimer

I, as the participant or parent or legal guardian of the above-named child, hereby give permission for his/her/my participation in the above-listed activity(ies). I further authorize, without prior approval, the rendering of any emergency medical treatment that may become necessary due to his/her/ my participation in the activity(ies). In consideration of the permission granted to me or the above-named child to participate in the activity(ies) listed above, I do hereby agree, on my own behalf as the participant or, if the parent or legal guardian, on my own behalf and on behalf of the above-named child, to release the City of Henderson and their officials, administrators, employees, agents, representatives, contracted instructors, and volunteers from any and all actions, causes of action, damages, claims, or demands of whatever kind or nature which I or the above named child may have against the City of Henderson or the other above-listed parties for any injuries, known or unknown, which are incurred by, arise from, or in any way relate to my or the above named child's participation in the activity(ies) described above. The City of Henderson is not responsible for lost or stolen items. The City of Henderson reserves the right to reconcile customer balances should the customer have available credit on their account. I represent that I am the parent or legal guardian of this child or that I have permission from the child's parent or legal guardian to enroll the child in this activity; and grant and give the City of Henderson the right to use my or my child's photograph or image, with or without my name or the name of my child, both individually and in conjunction with other persons or objects for any and all purposes including, but not limited to, private or public presentations, advertising, publicity and promotion. I authorize the City of Henderson to share information with the Clark County School District when necessary. I have read this release and fully understand its terms. I execute the release voluntarily and with full knowledge of its significance and consequences. I understand that a copy of this waiver of liability and disclaimer will not be provided to me and I am strongly encouraged by the City of Henderson to print a hardcopy for my records. I further understand that if I am a parent or legal guardian enrolling a minor child, I will be required to submit a new registration for each school year

Fitness & Sports Activity Waiver Of Liability and Disclaimer

Please read this carefully and be aware that by agreeing to it you will be waiving and releasing claims for potential injuries and property damage arising from participation in this fitness or sports activity. I, as the participant or parent or legal guardian of the above-named child, acknowledge that I understand the physical nature of this fitness or sports activity and that I, or the above-named child, am/is qualified, in good health, and in proper physical condition to participate in such activity. I further recognize and acknowledge that all athletic activities involving strenuous exertion or potential body contact are hazardous fitness activities and have substantial risks of injury such as transmission of diseases. I fully understand that fitness and sports classes may incorporate compound whole-body movements that demand focus and constant attention to form and may involve the risk of serious bodily injury, including, but not limited to, broken bones, torn ligaments, dislocated joints, head injury, stroke, loss of consciousness, cardiac arrest, muscle strain and sprain, back injury, joint pain, pelvic discomfort, knee or hip dislocation, punctures, abrasions, bruising, and shortness of breath which may result in permanent disability, paralysis and/or death. I understand that these and other risks may be caused by my own, or the above-named child's actions or inaction; or by others participating in this event; by the use and adjustment of any equipment or apparatus; the conditions in which the event takes place; or the negligence of the Releasers described below; and that there may be other risks either not known by me, or the above-named child, or not foreseen at this time. I fully accept and expressly assume all such risks and responsibility for injury, losses, costs, and damages I, or the above-named child, incur as a result of my or the above-named child's participation in the activity. I hereby release, discharge and covenant not to sue the City of Henderson, their respective administrators, directors, agents, officers, volunteers, contracted instructors and/or employees (Releasers) for occurrences of any nature or kind arising as a result of my or the above-named child's voluntary participation in this activity. If I, or anyone on behalf of me or the above-named child, makes a claim against any of the Releasers, I or my estate will indemnify, defend, save, and hold harmless each of the Releasers from any liability, loss, damage, or cost, whether for personal injury or property damage, which they may incur as a result of such claim, except to the extent described in the next paragraph. This release, waiver of liability, and express assumption of risk agreement does not apply to any liability, claims, demands, losses, or damages arising out of the intentional, willful, or wanton misconduct of Releasers. No oral representations, statements, or inducements apart from this waiver and release have been made. I have, or will, inspect the facilities and equipment to be used in conjunction with this event and if I believe any unsafe conditions exists, I will immediately advise a class trainer of such condition and refuse to participate until such condition is corrected. I further acknowledge that I have been advised by the City of Henderson to seek the advice of a health care provider prior to my, or the above-named child's, participation in this activity.

Participant/Parent/Guardian Signature _____

Date _____

Participant/Parent/Guardian Signature _____

Date _____

Waiver continued on reverse



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City Of Henderson Covid-19 Assumption Of Risk/Waiver/Release

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19 The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. The City of Henderson (the "City") has created new protocols and put in place preventative measures to reduce the spread of COVID-19; however, the City cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending any program may increase your child(ren)s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to, or infected by COVID-19 by attending the City program, and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the City program may result from the actions, omissions, or negligence of myself and others, including, but not limited to, City employees, volunteers, and program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself including, but not limited to, personal injury, disability, and death, illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)s attendance at the City program.

On my behalf, and on behalf of my child(ren)s, I hereby release, covenant not to sue, discharge, and hold harmless City, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the City, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any City program.

Participant/Parent/Guardian Signature

Date