

**Activity Registration Form** (Please print and use black or blue ink only)

Parks, Recreation & Youth Development 250 Frank H. Ogawa Plaza, Suite 3330 Oakland, CA 94612 (510) 238-7275 www.oaklandnet.com/parks

**CITY OF OAKLAND** 

## ACTIVITY INFORMATION

1. ACTIVITY INFORMATION			Today's Date			
Activity Name /		Activity Location	Activity Da	Alternate Activity Date	Fee Amount	
Direct Scholarship and I Decreation Site Director		e questions to		Grand Total	:	
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		TACT (other than l	•
Name _	First	Last	Relationship
			Email
	Home Phone	Work Phone	Cell Phone Email
employed liability action for in any a elsewhed manner purpose all my lo	ees, agents, volunt, damage, loss, and or strict liability, notivity conducted are. I agree to let the for any lawful pure of documenting a legal capacities, income	eers and all other per d expense, including negligence, gross or of by Oakland Parks, R he City of Oakland urpose including in its and promoting use of cluding on my own b	d hold harmless the City of Oakland, its directors, officers, rsons acting on its behalf, from any and all causes of action, attorney fees and court costs, whether based upon causes of otherwise, in connection with the participation of me or my child ecreation & Youth Development, whether on its premises or use my or my child's name and likeness free of charge and in any publications and website and/or other publications for the City of Oakland services and programs. This release is made in wehalf, and on the behalf of my spouse and any other parent or active and guardian of the enrollee.
Oakland child for Develop	l Parks, Recreation r any injury that moment or on or abo	n & Youth Developm hay result from particular put its premises. I und	<b>REATMENT</b> I hereby consent and authorize the City of nent staff to obtain emergency medical care for myself or my ipation in the activities of Oakland Parks, Recreation & Youth derstand that Oakland Parks, Recreation & Youth Development or participants of this program.
This for	m must be signed	by an adult (over ago	e 18), either the enrollee or the legal parent or guardian.
	X Signature o	of Enrollee or Parent	/Guardian Date
The amo	ount of your refun rental for which yo	d is determined by he ou paid. You may be	by the City Council in the City of Oakland Master Fee Schedule. ow late you requested the refund and the activity enrollment or charged an administrative fee for cancellations or transfers. In coordinator with questions.
prior to	a program. Direct	all inquiries concerr	EQUESTS: Please make accommodation request at least 10 days ning program and disability accommodation to the OPRYD -5064 or bposada@oaklandca.gov. VRS caller please dial 711.
Oakland gender, in any p to: Direct	d regulations strict sexual orientation program, activity, octor, Oakland Parl	ly prohibit discriming, AIDS or ARC. An or facility operated by	CRIMINATION 43CFR 17.6(b): Federal, State, and City of ation on the basis of race, color, national origin, age, handicap, y person who believes he or she has been discriminated against y Oakland Parks, Recreation & Youth Development should write ath Development, 250 Frank H. Ogawa Plaza, Ste. 3330,
☐ Cash	(in person only) rned checks will be subject	☐ <b>Mastercard / Vis</b> to an additional \$25 Service Fe	checks payable to City of Oakland sa: accepted online, in person, or over the phone. Please be advised the and a \$4.42 Postal Fee. Pursuant to Section 1719 of the California Civil Code, damages equal and a \$1,500 maximum) will be assessed if your check is not redeemed in cash within 30 days.