



Aquatics – Mail-in Registration Form



Mail-in registration is NOT a priority registration.
For a more convenient way to ensure a spot in our programs,
visit: www.clarkcountynv.gov/parksregistration.

Please familiarize yourself with the refund policy prior to registration.

Have you registered for Clark County Parks & Recreation programs before? _____

Parent/Guardian Information:

First Name _____ Last Name _____

Address _____ Apt. _____ City _____ Zip _____

Phone #1 _____ Phone #2 _____

Emergency Contact Name _____ Relation _____ Phone # _____

E-mail _____

Driver's License # _____

Information must be completed by a parent or legal guardian for participants under 18.

Participant #1 Name _____ Date of Birth _____

Participant #2 Name _____ Date of Birth _____

Participant #3 Name _____ Date of Birth _____

Participant #4 Name _____ Date of Birth _____

Do any of the above participants require special accommodations? _____

Please note that activity days, times and fees are subject to change.

Participant Name	Choice	Registration # (if known)	Activity Name (ex: Stroke Introduction)	Session (ex: 6B)	Class Days (ex: M/W)	Class Time (ex: 4pm)	Location	Fee
	1 st							
	2 nd							
	3 rd							
	1 st							
	2 nd							
	3 rd							
	1 st							
	2 nd							
	3 rd							
	1 st							
	2 nd							
	3 rd							

The department welcomes the participation of individuals of all abilities in programs offered and fully complies with the Americans with Disabilities Act (ADA).

Total

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Total check amount enclosed: \$ _____ Check #(s) _____ Driver's License # _____

PHOTO/VIDEO RELEASE: By registering for any Clark County Parks and Recreation program, I agree to allow publication of photos or video taken of my child/children or myself at any program, event or facility associated with the Clark County Parks and Recreation Department.

I, _____, acting on behalf of myself and my minor child/children do expressly and forever waive and release Clark County, Nevada, Clark County Parks & Recreation and their representative agents from any and all liability for personal injuries or damages sustained, incurred, or arising from participation in County sponsored swimming programs.

Signature _____ Date _____