



Program _____

Program Date _____

Clark County Wetlands Park Program Registration Form

Thank you for your interest in our programs! You can sign up using this form or online.

Adult Participant:

First Name: _____ Last Name: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-Mail: _____ DOB: _____ SEX: M F

Additional Participants: *Additional participants must be part of your household, living at your address. If minors, you must be their legal guardian.*

1. First & Last Name: _____ DOB: _____ Sex: M F

2. First & Last Name: _____ DOB: _____ Sex: M F

3. First & Last Name: _____ DOB: _____ Sex: M F

4. First & Last Name: _____ DOB: _____ Sex: M F

5. First & Last Name: _____ DOB: _____ Sex: M F

Does anyone in your household have special needs? Please let us know:

Household Emergency Contact:

Name _____ Relationship: _____ Phone: _____

WAIVER OF CLAIM

I, _____, acting on behalf of myself and/or my minor child, do expressly and forever waive, release, and hold harmless and indemnify Clark County from and against any and all claims, demands, obligations, causes of action and lawsuits and all damages, liabilities, fines, judgments and costs (including reasonable attorney's fees) associated with, arising from or alleged to have risen from the actions or omissions of myself, my minor child or the organization, its agents, employees or contractors, in connection with the activities operated, organized, arranged, or sponsored by the Clark County Department of Parks and Recreation.

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.

Signature of Parent/Guardian: _____ Date: _____

*** By signing this form I/we acknowledge that I/we have read and understand the rules and guidelines with my/our child(ren).**