

# 2017 Summer Activities Program (SAPling)

NLR PARKS & RECREATION



## RECREATION PROGRAMS

### Registration/Application Form

Please complete this application for NLRPR recreational programs.  
(Additional Registration options available on other side if needed)

#### Participant Information

Please Print

Participant's Name \_\_\_\_\_

Parent's/Guardian's Name \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell-Phone \_\_\_\_\_

Email Address: \_\_\_\_\_

T-shirt Size: Circle

YS YM YL AS AM AL AXL 2X 3X

Birth date \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_

**\*Grade (2017-2018 year)** \_\_\_\_\_

Additional Parent's Guardian's Name: \_\_\_\_\_

Work-Phone: \_\_\_\_\_

Cell-Phone: \_\_\_\_\_

Emergency Contact Info:

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Phone \_\_\_\_\_

#### Program Information

Select all that apply

circle fee(s) to be paid

#### Community Center

(select one):

- Glenview CC
- North Heights CC
- Sherman Park CC
- Rose City CC

#### Program/Class - Session

- Session 1 (June 5-June 23)
- Session 2 (June 26 - July 7)
- Session 3 (July 10-July 21)
- Session 4 (July 24-Aug 4)
- Mini Skills Camp (Aug 7 -Aug 11)

#### Fees

- \$65
- \$45
- \$45
- \$40
- \$25

**Total Payment Due:** \_\_\_\_\_

**Early Registration discount if you register and pay for ALL Focus Camps by May 27th-\$175<sup>00\*</sup>**  
DOES NOT INCLUDE MINI SKILLS CAMP FEES

#### ASSUMPTION OF RISK RELEASE OF LIABILITY

It is understood that the North Little Rock Parks and Recreation Department (NLRPR) does not provide medical insurance covering injuries of any nature incurred during recreational programs at NLRPR facilities or during the transportation of participants to and from activities or special events. The undersigned hereby releases the NLRPR, its successors, assigned officers, agents and employees from any and all claims, demands and causes of action whatsoever in any way growing or resulting from participation in the program. All participants should be covered by their own insurance.

Participant's or Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

*If participant is under 18 years old, parental signature is required.*

#### WAIVER RELEASE FORM

I hereby authorize the staff of the NLRPR to act for me according to their best judgment in any emergency requiring medical attention involving my child. I waive and release said director, staff members and the City of NLR from any and all liability for all injuries and illnesses incurred while in the program.

Participant's or Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

*If participant is under 18 years old, parental signature is required.*

#### PHOTO WAIVER RELEASE FORM

I hereby grant NLRPR specific permission to reproduce, publish, circulate, copyright or otherwise use any and all photographs and/or videotape of me and/or my family, taken during the program, for use by NLRPR.

Participant's or Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

*If participant is under 18 years old, parental signature is required.*

#### For Office Use Only

Date Rec'd: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_ Cash / Check # \_\_\_\_\_ Receipt # \_\_\_\_\_