



Arbuckle Parks and Recreation District
Junior Guard Registration Form

Name _____ Age _____ Date of Birth _____

Father Name _____ Mother Name _____

Home Phone _____ Work/Cell Phone _____

Address _____

Email Address _____

School _____ Grade _____ M _____ F _____

Fee _____ Method of Payment _____ Receipt # _____

Multiple Child Discount: 1 child - \$40, 2 children- \$75, 3 children- \$105

Or free if child volunteers to be a swimming lesson aide for any session they take Junior Guard.

(Please make checks out to Arbuckle Parks and Recreation District or APRD)

There are no refunds for programs after the first day. Refunds that are given will have a \$5.00 or 15% sir charge, which ever is less.

There are no make-ups unless something unexpected occurs with the facility or the instructor.

Emergency Information- Authorized persons to be called in case of an emergency

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Health Insurance Company _____

Family Physician _____ Address _____ Phone _____

I hereby certify that the above named child is in normal health and is capable of participating safely. I understand that Participants agree to release all liability and hold the Arbuckle Parks and Recreation harmless. I give my permission for the above child to participate. I give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. I understand that my child participates at his/her own risk.

Parent/Guardian Signature _____

Photo Release: Photos may be taken for publicity purposes only during program events.

Parent/Guardian Signature _____