

Primary Household Contact Information

First Name _____ Last Name _____

Address _____ City _____ State _____ Zip _____

Phone # () _____ Cell # () _____

Email Address _____ Email Address _____

Emergency Contact _____ Relationship _____ Phone # () _____

Health Concerns/Special Circumstances: Please list any health concerns or special circumstances for the participant(s): medications, allergies, etc.

Program Information

One registration form may be used for more than one person in the same household.

First & Last Name	M/F	DOB	Grade	School	Program & Dates

Make checks payable to *City of Malibu*. Mail payment and registration form to: City of Malibu, Community Services Department, 23825 Stuart Ranch Road, Malibu, CA 90265

REFUND POLICIES & PROCEDURES:

- A program may be cancelled due to low enrollment.
- A full refund will be issued only in the event that a program is cancelled by the Community Services Department.
- There will be a \$10.00 service charge per person per program for refund requests.
- Single Day Programs and Multi-Day Programs (including but not limited to day camps, workshops, classes and aquatics): refund requests must be submitted one week prior to the program start date.
- Sports Leagues and Tournaments (including all individual and team registrations): refund requests must be submitted prior to the posting of the game schedule or two weeks before the first scheduled game, whichever occurs first.
- Participants may not receive a refund if their refund request is not submitted within the prescribed application period. Refunds will not be issued for no-shows.
- Participants may receive a credit (less non-refundable fees) for medical related issues or special circumstances approved by the Recreation Manager.
- Refund requests must be submitted online at malibucity.org/refund request or in person at Malibu Bluffs Park, Malibu City Hall or the Malibu Community Pool.
- A check will be issued by the City and mailed to the original payee within ten business days. Participants may elect to keep a refund on account as a credit. The credit will remain available on the participant's recreation account up to one year from the date of issue. After one year, the credit will be refunded via check to the participant.
- Any costs incurred by the City or a contract instructor including but not limited to uniforms, supplies, or equipment provided to the participant, will be deducted from refunds, credits, or transfers.
- Fees paid shall be refunded, credited, or transferred at a pro rated rate for programs cancelled by the City after the first meeting date, less non-refundable fees such as uniforms, supplies or equipment.

Scholarship Program: Financial aid may be available on a limited basis and will be prioritized by need. All required paperwork must be submitted one week prior to the first program date in order to be considered.

Release Agreement

– PLEASE READ CAREFULLY AND SIGN BELOW –

Individuals with disabilities requiring any accommodations to participate in the programs in which you are registering must inform the City of Malibu at the time registration is submitted. Individuals needing such accommodations must document the need for such accommodations, including the type and extent of accommodations to complete the registration form or participate in the registered program. The City of Malibu, as a matter of policy and law, will administer and conduct all City programs in such a manner that no qualified individual with a disability will be excluded from participation in, or be denied benefits of services, programs, or activities of the City. If any individual feels that he/she or a group of individuals with a disability are being discriminated against, the person(s) or group(s) are encouraged to contact the City's ADA office by phone at 310.456.2489, or in writing to Compliance Officer, 23825 STUART RANCH RD, MALIBU, CA 90265.

I fully understand that my and/or my child's participation in the above described program (the "Program") exposes me and/or my child to risk or personal injury, death or property damage. I hereby acknowledge that I am voluntarily participating in this Program and agree to assume such risks.

I hereby release, discharge and agree not to sue the City of Malibu, including its officers, employees, and agents, (hereinafter the "City") for any injury, death or damage to or loss of personal property arising out of, or in connection with, my and/or my child's participation in the Program from whatever cause, including the active or passive negligence of the City or any other participants in the program. The parties to this agreement understand that this document is not intended to release any party from any act or omission of "gross negligence," as that term is used in applicable case law and /or statutory provision. In consideration of being permitted to participate in the Program, I hereby agree, for myself, my heirs, administrator, executors and assigns, that I shall defend, indemnify and hold harmless the City from any and all claims, demands, actions or suits arising out of or in connection with my and/or my child's participation in the Program.

I HAVE CAREFULLY READ THIS RELEASE, HOLD HARMLESS AND AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT IT IS A FULL RELEASE OF ALL LIABILITY AND SIGN AT MY OWN FREE WILL.

I further agree and acknowledge that the City does not provide accident, medical, liability, workers' compensation insurance or any other insurance for program participants. As parent/guardian, I hereby consent to emergency treatment of my minor child as a result of accident or injury. I further agree to pay any and all costs incurred as a result of said treatment. I agree to carefully inspect and satisfy for myself that the facilities provided are reasonably safe for their intended use. I understand the City retains the right to use photos taken of me and/or my child during activities for publicity purposes.

Adult/Parent _____ Date _____
 (Signature required to process registration)