City of San Mateo Parks & Recreation Department

Activity Registration Form

- Resident*  - Nonresident
  *individuals residing within the City of San Mateo property tax limits

Adult Registrant __________________________________________ Date of Birth ________________

Home Address _______________________________________________________________
City ___________________________________________________ Zip ___________________

Home Ph. ___________________________ Cell Ph. _____________________

E-mail Address ________________________________________________________________

Emergency Contact ___________________________ Phone # __________________________

<table>
<thead>
<tr>
<th>Participant Name</th>
<th>Date of Birth</th>
<th>Gender</th>
<th>Activity Code</th>
<th>Activity</th>
<th>Fee</th>
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<tbody>
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<td>N/A</td>
<td>Get Around Senior Transportation Membership</td>
<td>N/A</td>
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TOTAL $

**WAIVER OF LIABILITY & PHOTO RELEASE:** In consideration of participation in the City of San Mateo recreation program described above (the “Activity”), I the undersigned for myself and/or as the parent/guardian of the Minor named above, agree to indemnify and hold the City of San Mateo, its elected and appointed officials, employees, and agents (the “City”) harmless and hereby waive, release and discharge any and all claims for damage, for death, personal injury, bodily injury or property damage which I and/or the Minor may have or which hereinafter may accrue to me and/or the Minor against the City from and against any liability arising out of or connected in any way with my and/or the Minor’s participation in this Activity, even though that liability may arise out of negligence or carelessness on the part of the person or entities mentioned above.

I understand that accidents and injuries can arise from participation in this class or activity; knowing the risks, nevertheless, I hereby agree to assume those risks on behalf of me and/or the above named Minor and to release and to hold harmless all of the persons or entities mentioned above whom (through negligence or carelessness) might otherwise be liable to me and/or the above named Minor (or my/our heirs or assignees) for damages. It is further understood and agreed that this waiver, release and assumption of risks has been freely entered into and is to be binding on my/our heirs and assigns.

I have read and agree to the registration and program policies. Further, I agree to allow use of my image and/or that of the named minor, which may be captured through video, photo, digital camera or other media, for City of San Mateo promotional materials and publications. By my signature below, I acknowledge that I have read this document and understand its contents.

Check the appropriate space(es) and sign:  □ Participant (over 18)  □ Parent  □ Legal Guardian

Print Name: __________________________________________ Name of Participant: __________________________
Signature Required: __________________________ Parent/Guardian, if under 18: __________________________

☐ I will need a wheelchair/scooter accessible vehicle

☐ Please send further information in **SPANISH**

Enroll now: www.sanmateorec.org