

Butterfield Park District ♦ 21W730 Butterfield Rd. ♦ Lombard, IL 60148 ♦ (630) 858 - 2229

Payer	Address
Email Address	City/State/Zip
Home/Cell Phone	Emergency Contact Name/Phone

Group Dive Lessons

Ages 7 - 18 years | 6:45 – 7:15 pm

Program Dates	Day	Fee	Participant Name / DOB
Session I: June 4 – June 14	M Tu Th	Resident:\$35 Non-Resident:\$45	
Session II: June 18 – June 28	M Tu Th	Resident:\$35 Non-Resident:\$45	
Session III: July 2 – July 12	M Tu Th	Resident:\$35 Non-Resident:\$45	
Session IV: July 16 – July 26	M Tu Th	Resident:\$35 Non-Resident:\$45	

Private Dive Lessons

Ages 6 - 18 ~ Time TBD with Instructor ~ 30 minutes per lesson

Program Dates	Fee	Participant Name / DOB	Preferred Day/Time
June 4 – August 11	\$20/lesson \$145/10 lessons		

Special Notes:

- Refund or credits will NOT be given because of inclement weather.
- Lessons will take place if it is raining and/or if temperatures are cold.
- Dive Lessons will take place indoors (safety day) in the event of severe weather such as thunder and/or lightning.

Fees:	FORM OF PAYMENT
	CASH <input type="checkbox"/> CARD <input type="checkbox"/> CHECK <input type="checkbox"/>
	CARD #: _____
	EXP. DATE: _____ V-CODE: _____
Total:	SIGNATURE: _____

Butterfield Park District Waiver and Release: Important Information

Participants and parents/guardians of minors registering for the above listed programs/activities must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs. You are solely responsible for determining if you or your minor child/ward are physically fit and/or skilled for the activities contemplated by this agreement.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in these programs/activities against the Butterfield Park District, including its officials, agents, volunteers, and employees (herein after collectively referred as Butterfield Park District).

I do hereby fully release and forever discharge the Butterfield Park District from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with these programs/activities.

PHOTO RELEASE

By registering for any Park District program I agree to allow publication of any photos taken at any program, event, or facility of the Butterfield Park District.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering via fax my facsimile signature will substitute for and have the same legal effect as an original form signature.

AUTHORIZATION FOR MEDICAL TREATMENT

- I, the undersigned, hereby agree to allow the individual(s) name hereon to participate in the Butterfield Park District activities.
- I certify that to the best of my knowledge, the participants named hereon is/are physically fit and able to engage in Recreation Services Division activities.
- In case of emergency, I give my permission for emergency medical treatment.
- This form shall be considered valid until canceled or changed in writing by the undersigned parent/guardian/participant.
- My signature acknowledges that I understand and agree to the above conditions.
- I have read and understand the waiver and release on this form.

Signature

Date