

TOWN OF COLMA ACTIVITY REGISTRATION FORM



If you are registering for multiple programs and need more room, please feel free to make copies of the registration form.

Payer Name: _____
(First Name) (Middle Initial) (Last Name)

Address: _____
(City) (Zip)

Home: () _____ Work: () _____ Emergency: () _____

Participant's Full Name	Grade/ Age	Sex (M/F)	Birth Date	Program Date/Day	Activity Name	Program Fee
					TOTAL FEES	

Liability Release: In consideration of the acceptance of my application for entry into each above activity, I hereby waive, release and discharge any and all claims for damages for death, personal injury or property damage which I may have, or which hereafter accrue to me, against the Town of Colma as a result of my participation in the activity. This release is intended to discharge the Town of Colma, its officers, officials, employees and volunteers, any other involved municipalities or public agencies from and against any and all liability arising out of or connected in any way with my participation in the activity, even though that liability may arise out of the negligence or carelessness on the part of persons or Town of Colma. I further understand that accidents and injuries can arise out of the activity; knowing the risks, nevertheless, I hereby agree to assume those risks and to release and to hold harmless all of the persons or agencies mentioned above who (through negligence or carelessness) might otherwise be liable to me (or my heirs or assigns) for damages. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns.

I am aware of the cancellation policy and the penalties involved for activities for which I have registered myself and family. I realize that while participating in any Town sponsored activities myself or a family member may be photographed and that photo may be used for a future Town of Colma publication, report, flier and/or advertisement.

Signature _____ Date _____

Parental Consent: (To be completed if participant is under 18 years of age). I give my consent for my son/daughter _____ to participate in the above activity and I execute the above liability release on his/her behalf.