

Milpitas Preschool Registration Form • Fall 2008-Spring 2009

Participant's Name: First: _____ Last: _____

Address: _____ City: _____ Zip: _____

Home Phone: (_____) _____ Child's Age: _____ Date of Birth: ____/____/____ Male Female

Mother's Name: _____ (mother/guardian) Work #: (_____) _____ ext. _____ Cell Ph #(_____) _____

Father's Name: _____ (father/guardian) Work #: (_____) _____ ext. _____ Cell Ph #(_____) _____

Email Address: _____ Does the participant require any special accommodations to participate in these activities? YES NO If Yes, a staff member will contact you.

Class Registration Information (Child must be registered in the appropriate class according to his/her birthdate.)

Circle your **first** class choice:
Participant may be enrolled in one class session only.

Animal Crackers	M/W or Tu/Th	Morning Session or Afternoon Session
KinderKids	M/W or Tu/Th	Morning Session or Afternoon Session

Circle your **second** class choice:
(should your first choice be full)

Animal Crackers	M/W or Tu/Th	Morning Session or Afternoon Session
KinderKids	M/W or Tu/Th	Morning Session or Afternoon Session

Registration Fee:	\$	100.00
Class Fee*	\$	
Total Due:	\$	

Payment
 Check
 Credit Card

*25% of class fee and non-refundable Registration Fee is due at time of registration. Balance can be paid through Payment Plan.

Credit Card Information: Type of Card: MasterCard VISA

Name on Card: _____ Card Number: _____

Exp (M/Y): ____/____ Signature Authorizing Use: _____

I authorize this card to be charged the balance due in three equal payments on 11/6/08, 1/8/09 and 3/5/09. ____ initial

Waiver of Liability

DO NOT SIGN THIS DOCUMENT BEFORE YOU READ IT AS IT CONTAINS A WAIVER AND RELEASE OF LIABILITY TO WHICH YOU WILL BE BOUND

I, _____ declare that I am the parent/legal guardian of _____.
 I, the undersigned, do hereby agree to allow the individual(s) named herein to participate in the aforementioned activity(ies) and I further agree to indemnify and hold the City of Milpitas harmless from and against any and all liability for any injury which may be suffered by the aforementioned individual arising out of or in any way connected with his/her participation in this activity. The undersigned further authorizes the administration of any first aid steps that may be deemed necessary by qualified personnel. I also agree, as a participant of any paid or free event, class, activity, or program, to grant full permission to the City of Milpitas to use my name and any photographs, videographs, motion pictures or recordings for any publicity and promotion purposes without obligation or liability to me. I verify that all the above information is true and accurate. I have read, understand and agree to all of the policies of Milpitas Parks and Recreation Services' in regards to Refund/Cancellations, Transfers, Late Pick-Ups, Preschool Refunds, Code of Conduct and Discipline Plan, and Class Cancellations and Wait Lists listed in the Registration Policies section of this website and in the current Activity Guide. **I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS WAIVER AND RELEASE AND I FULLY UNDERSTAND THAT, BY SIGNING BELOW, I AM WAIVING ANY RIGHT THAT I MAY HAVE TO BRING A LEGAL ACTION OR TO ASSERT A CLAIM AGAINST THE CITY OF MILPITAS FOR NEGLIGENCE.**

Signature: _____ Parent Legal Guardian

Print Name: _____ Date: _____