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Lake Merritt Boating Center
568 Bellevue Avenue, Oakland, CA 94610.



For questions call (510) 238-2196
Fax (510) 238-7199
www.oaklandnet.com/parks

REGISTRATION FORM

(Please print and use black or blue ink only)

Today's Date _____

Activity Name: <i>Sailing Into Science</i>	Activity Number:	Fee Amount	Nonresident/Other Fee	Total Fees
School:	Teacher:	N/A	N/A	N/A

Enrollee Information Male Female Child Teen Adult SeniorName _____
First Middle Last

Address _____

City _____ State _____ Zip _____

Phones _____
Home Phone Work or Cell Phone

Email _____ Birth Date _____

Ethnicity: African American American Indian White
 Asian/Pacific Islander Hispanic/Latino

Age _____ School _____ Grade _____

Parent/Primary Caretaker (For Children under the age of 18)Parent/Guardian Name _____
First Middle Last

Address _____

City _____ State _____ Zip _____

Phones _____
Home Phone Work or Cell Phone

Email _____ Relationship to Child _____

Medical Information

Doctor _____ Clinic/Office Phones _____

Medical Insurance Carrier _____ Policy # _____

Please explain medical or special needs:

 Allergies Medications Physical Limitations Diet Restrictions**Other Emergency Contact**Name _____ Relationship _____
First LastPhones _____
Home Phone Work or Cell Phone**For Children Under the Age of 18:**

I hereby make the following provisions for the daily pick up or release of my child:

____ Child may walk home ____ Child may be picked up by parent only
____ Child may be picked up by one of the following individuals and ONLY those individuals:

Name _____ Relationship _____

1. **Accessibility** The City of Oakland Office of Parks and Recreation (OPR) is fully committed to compliance with the provisions of the Americans with Disabilities Act. Please make accommodation requests at least 10 days prior to an event. Direct all inquiries concerning program and disability accommodation to the OPR Inclusive Recreation Coordinator at (510) 615-5980 or eburton@oaklandnet.com. VRS callers please dial (510) 615-5883.

2. **Release Waiver** I hereby release and hold harmless the City of Oakland and the Office of Parks and Recreation, its directors, officers, employees, agents and all other persons acting on its behalf, from any and all causes of action, liability, damage, loss, and expense, including attorney fees and court costs, whether based upon causes of action for strict liability, negligence, gross or otherwise, in connection with the participation of me or my child in any activity conducted by the Office of Parks and Recreation, whether on its premises or elsewhere. This release is made in all my legal capacities, including on my own behalf, and on the behalf of my spouse and any other parent or guardian of the enrollee, and as legal representative and guardian of the enrollee. I agree to let the parties use Participant's name and likeness free of charge and in any manner for any purpose without compensation to the Participant or me.

3. **Authorization for Medical Treatment**

I hereby consent and authorize the City of Oakland and Office of Parks & Recreation staff to obtain emergency medical care for myself or my child for any injury which may result from participation in the activities of the Office of Parks & Recreation or on or about its premises. I understand that the City of Oakland, the Office of Parks and Recreation do not provide medical insurance coverage for participants of this program.

4. **Refund Policy** Refund amount are set by the City Council and the City of Oakland Master Fee Schedule. The amount of your refund is determined by how late you requested the refund and the activity enrollment or facility rental for which you paid. You may be charged an administrative fee for cancellations or transfers. If you have any questions, please contact the recreation center or program coordinator.

5. **Title VI Compliance Against Discrimination 43CFR 17.6(b)**

Federal, State and City of Oakland regulations strictly prohibit discrimination on the basis of race, color, national origin, age, handicap, gender, sexual orientation, AIDS or ARC. Any person who believes he or she has been discriminated against in any program, activity, or facility operated by the Office of Parks and Recreation should write to: Director, Office of Parks and Recreation, 250 Frank H. Ogawa Plaza, Ste. 3330, Oakland, CA 94612 or Call (510) 238-3092.

**This form must be signed by an adult
(over age 18), either the enrollee or the
legal parent or guardian.**

X _____
Signature of Parent/Guardian **Date**