## Village of Island Lake Parks and Recreation Program Registration Form

Event: Participants Name: Address:			
		Email:	Phone:
		Parent Name if Minor:	
Emergency Contact:	Phone:		
Liability and	Agreement Waiver		
participation in Village of Island Lake Parks and claims for injuries or illnesses you or your child/recognize and acknowledge that there are cert program and I agree to assume full risk of any which I or my child/ward may sustain as a resuassociated with this program." I agree to waive a result of participating in the program against and employees from any and all claims resulting	at by registering you or your minor child/ward for Recreation Programs you will be waiving and releasing al ward might sustain out of activities of this program. "I cain risks of physical injury due to participation in this such injuries, damages or loss, regardless of severity alt of participating in any activities connected or and relinquish all claims I or my child/ward may have as the Village of Island Lake and its officers, agents, servants g from injuries, damages and losses sustained by me or th, or in any way associated with the activities of the		
be used for decorating bulletin boards or other newsletter, Facebook or Website and I give my above release, waiver and photo release. My sig Participant is under the age of 18 years indicate liability waiver and the photo release on this for	child/ward or I will be photographed. These photos may publicity purposes, as well as appear in our Village permission for this. I have read and fully understand the gnature below as Participant or Parent/Guardian, if es that I have carefully read and understand the insurance rm. By signing this form you also agree to pay court costs and Lake in enforcing any terms of this agreement.		
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