Play, Activate, Connect Kids Registration Form 2021



Participant Informatio		Site:					
Last Name		First Name Pr		Preferred I	referred Name		
Mailing Address		City State Zip _		Zip			
Home Phone							
Date of Birth				School	Grade		
I want Parks, Recreation and Cul	tural Resources to k	now about these med	ical conditior	ns for the participant: _			
I want Parks, Recreation and Cul	tural Resources to k	now about these disal	bilities for the	e participant:			
I request ADA accommodation fo	r the disability/medic	al condition listed.	Yes	No			
The City of Raleigh Parks, Recreation or special needs. We are committed programs. To ensure that reasonable weeks prior to the start date of the programs.	to compliance with the accommodations are	e ADA and will provide re in place, program regis	easonable ac stration or acc	commodations to facilitate ommodation request sho	te participation in our		
Parent/Guardian Cont	act Informati	on					
Parent/Guardian		Relationship to Participant					
Home Phone		Cell Phone					
Email							
Address				State	Zip		
		Relationship to Participant					
Home Phone		Cell Phone					
Email							
Address				State	Zip		
Emergency Contact a							
Please list additional names of case of an emergency and all Please print all names.							
Name		Relationship to Participant					
Home Phone		Cell Phone					
I authorize staff to disclose i	nformation about th	ne participant's beha	avior and oth	ner activities at Parks	PACK.		
Name		Relationship to Participant					
Home Phone							
I authorize staff to disclose i	nformation about th	ne participant's beha	avior and oth	ner activities at Parks	PACK.		
Name			Rela	ationship to Participan	t		
Home Phone		Cell	Phone				

♦ I authorize staff to disclose information about the participant's behavior and other activities at Parks PACK.

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Non-Discrimination Policy

The policy of the City of Raleigh is, and shall be, to oppose any discrimination based on actual or perceived age, mental or physical disability, sex, religion, race, color, sexual orientation, gender identity or expression, familial or marital status, economic status, veteran status or national origin in any aspect of modern life. A participant alleging discrimination on the basis of any of the aforementioned areas may file a complaint with either the Director of Raleigh Parks, Recreation and Cultural Resources Department or the Office of Equal Opportunity, U.S. Department of the Interior, Washington, D.C. 20240.

Photo/Media Policy

I acknowledge and agree that the City of Raleigh may take photographs and video of individuals or groups participating in programs and events and may use any photographs(s) and/or video taken of me or my child to publicize the program and for other City-related purposes.

COVID-19 Risks/Release, Indemnity, and Agreement Not to Sue (revised 7/6/2020)

The City of Raleigh has been forced to confront the potential dangers associated with the COVID-19 pandemic. The City's Parks, Recreation, and Cultural Resources (PRCR) Department remains committed to providing high quality programming. However, in order to comply with guidelines from the Centers for Disease Control (CDC) and other federal, state, and local public health agencies, the PRCR Department has implemented additional safety precautions to ensure that program participants and other PRCR Department staff will have a fun, exceptional experience. The contents of this document supplement applicable program policies (including Camp Policies and School-Based Program policies), the Program Registration Form, and the online registration for participants who registered through RecLink at parks.raleighnc.gov. Unless amended herein, all prior policies applicable to the program for which you have registered remain in effect. Please review the following information carefully to learn more about what the City is doing to maintain a healthy program environment and what participants (or their Parents/Guardians, if applicable) should do before participating in the PRCR program for which you have registered.

COVID-19 Risks

Signature _

COVID-19 is a highly contagious and novel viral agent. Its transmission vectors are imperfectly understood, and it may be possible to transmit or become infected by COVID-19 despite strict adherence to guidelines prescribed by the CDC and other federal, state, and local health agencies. Participants in Raleigh Parks programs will be in a group setting where they may come into contact with other program participants (instructors, coaches, campers, camp counselors, camp program staff, and camp program administrators, etc.). Many program activities will be conducted in a public community center setting. As a result, while PRCR Department staff will make reasonable efforts to adhere to the above-stated guidelines, participants in PRCR programs may be exposed to increased risk of transmission or infection of COVID-19 through various actions or interventions, including but not limited to contact with or proximity to one or more of the following:

- · Other program participants, staff members, or administrators;
- The personal belongings of program participants, staff members, or administrators;
- Programming and activity materials including, but not limited to, markers, books, games, toys, recreational equipment, etc.; and;
- City of Raleigh community center fixtures and furnishings, including door knobs, chairs, tables, plumbing apparatus, light switches, etc.

I understand that participating in the recreational program selected involves risk of injury or illness. These risks include, but are not limited to, inclement weather, accidents while traveling, food related illness, equipment problems or failures, contact with and actions of other participants, spectators, and volunteers, slips/trips/falls, musculoskeletal injuries, exposure to and illness from infectious diseases, and any and all risks described in the preceding section. I choose for myself or for my child to participate in the selected programs despite the risks. By signing below, I acknowledge all risks of injury, illness, death, and property damage, and affirm that I have assumed all responsibility of injury, illness, or death in any way connected with participation in the program. I also agree for myself and for any child participant to follow all rules and procedures of the program and to follow the reasonable instructions of the counselors, staff members, and supervisors of the program.

By signing below, I acknowledge that I have read, understand, and agree to the City of Raleigh policies listed on this form and in the I	Raleigh
Parks PACK Policies. Signature is required to complete the registration process.	
Parent/Guardian Name (Printed)	