Account and Program Registration Form





Main Contact						
First Name	Last Name	C	ОВ	//_		le 🗌 Female
Mailing Address	(City	State		Zip	
Primary Phone	Phone Type: 🗌 C	ell 🗌 Home 🔲 Work	*Email			
Emergency Contact		Phone.				
Optional: 1. What is this person's race? (Selection of Native Hawaiian and Pacific Island). 2. Is this person of Hispanic, Latino,	nder 🗌 White 🔲 Other Rac	e	e 🗌 Asian	☐ Black or Af	rican Ame	erican
Registration Receipt: (for mail-in) I wou * By providing my email address I agree to The City of Raleigh Parks, Recreation and or special needs. We are committed to coprograms. To ensure that reasonable accommodes are programs to the start date of the programs.	o receive email communication for Cultural Resources Department mpliance with the ADA and will purmodations are in place, progra	rom Raleigh Parks, Recre welcomes the participa provide reasonable acco m registration or accom	eation and Co tion of all ind mmodations nmodation re	ultural Resource lividuals, includii to facilitate pa equest should be	<i>s.</i> ng those v rticipatior	vith disabilities n in our
Participant Information						
Participant #1 Name	DOB	//	_	☐ Female		
Parent/Guardian Last Name If participa	nt is under 18	Paren	t's First Nan	ne		
Please note any allergy, disability, healt	h/medical condition or other i	nformation you would	like to share	with us		
Would you like to request an ADA acco	mmodation or program modifi	cation for a disability a	and/or medi	cal condition?	□ Yes □] No
Course Barcode Pr	rogram Name	Location			Time	Fee \$ \$
Participant #2 Name						
Parent/Guardian Last Name If participa	nt is under 18	Paren	t's First Nan	ne		
Please note any allergy, disability, health	/medical condition or other info	ormation you would like	to share wi	th us:		
Would you like to request an ADA acco Course Barcode Pr	mmodation or program modificogram Name	cation for a disability a	and/or medi 	cal condition? Date	☐ Yes ☐ Time	No Fee
						\$
Registration Information						
Payment is required at the time of re		_				
Non-resident fees do not apply		Non-City of Raleigh I				
друг	_	a donation to suppor	t a child's p	participation i	n	
			TOTAL	AMOUNT DUI	E \$	_
Payment Information						
☐ Check #	(checks payable to City o	of Palaigh)	Order			

Credit Card payments may be made at a staffed facility or through the online registration system RecLink. Visit parks.raleighnc.gov and select "Register on RecLink". If you would like to complete your registration online, but prefer not to pay online with a credit card, you may add a credit to your account prior to online registration by making a payment at a community center or the Recreation Business Office.

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Remember you can also register online with RecLink at parks.raleighnc.gov



Cancellation and Refund Policy

- When an activity is cancelled by Raleigh Parks, fees are 100% refundable.
- Any participant wishing to withdraw from an activity or league must do so at least 14 days prior to the scheduled start of the activity or league. Refunds must be requested online through RecLink, by email to reclinksupport@raleighnc.gov, or provided in writing to the Recreation Business Office, 2401 Wade Avenue, Raleigh, NC 27607.
- Withdrawal and cancellation requests after the 14-day notice period will be granted, but no refund will be given with the exception of approved medical or hardship cases. Medical and hardship cases are considered on a case-by-case basis and may require additional documentation.
- Non-attendance or non-participation in an activity does not entitle the patron to a refund/credit.
- If you wish to leave your **credit on your account**, the credit will be valid for one (1) year. By leaving the credit on the account, the participant also agrees that credits remaining inactive after one (1) year will be donated to the Raleigh Scholarship Fund, without further notification.

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.

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.

COVID - 19 Risks / Release, Indemnity, and Agreement Not To Sue (revised April 2021)

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

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. Signature is required to complete the registration process.

Participant Signature	Date		
Signature of parent/legal guardian if child is under 18	Date		