



Participation Form
Visually Impaired Program
City of Raleigh Parks, Recreation and Cultural Resources Department
2401 Wade Ave. Raleigh NC, 27607

Participant Name: _____ DOB/Age: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Participant Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Please select one option for receiving the newsletter: [] Audio [] Braille [] Email [] Large Print

In an effort to better assist you, please indicate your level of vision impairment:

- [] Partial/ No Assistance [] Partial/ Minimal Assistance [] Partial/ Moderate Assistance
[] Total/ Assistance required [] No Impairment

Please identify two emergency contacts; one contact must have a current motor vehicle license.

Primary Emergency Contact Person: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Secondary Emergency Contact Person: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Is there any medical information that you wish to disclose that may assist staff or medical service providers in the event of an emergency?

Non-Discrimination Policy

The City of Raleigh Parks, Recreation and Cultural Resources Department does not discriminate on the basis of race, color, national origin, sex, religion, age, sexual orientation or disability in employment opportunities or the provision of services, programs or activities. A participant alleging discrimination on the basis of any of the aforementioned areas may file a complaint with either the Director of the Raleigh Parks, Recreation and Cultural Resources Department or the Office of Equal Opportunity, U.S. Department of the Interior, Washington, D.C. 20240.

Release and Indemnity Statement

I understand that participating in the recreational program(s) selected involves risk of injury. These risks include weather, accidents while traveling, equipment problems or failures, contacts with and action of other participants, slips/trips/falls, and musculoskeletal injuries, among others. I choose for myself or my child to participate in the selected program(s) despite the risks. By signing this form, I acknowledge all risks of injury, illness, and death and affirm that I have assumed all responsibility for injury, illness, or death in any way connected with participation in the program(s). 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 teachers and supervisors of the program. In return for the opportunity to participate in this program, I agree for myself and for my heirs, assigns, executors, and administrator to release, waive, and discharge any legal rights I may have to seek payment or relief of any kind from the City, its employees, or its agents for injury, illness, or death resulting from this program. If I am registering a child for this program, I agree that I am a parent, legal guardian, or am otherwise responsible for the child whose application I am submitting and that I release, waive, and discharge any legal rights that I may assert on behalf of the child participating in the program(s). I also agree not to sue the City, its employees, or its agents and agree to indemnify the City for all claims, damages, losses, or expenses, including attorney's fees, if a suit is filed concerning an injury, illness, or death to me or my child resulting in participation in the program(s).

I understand that the City of Raleigh provides no insurance coverage for me.

Pictures or video may be taken of participant for use in program publicity. [] Please check if you DO NOT approve.

By signing below, I acknowledge that I read, understand and agree to the City of Raleigh policies listed on this form.

Signature of participant OR parent/legal guardian (if under 18)

Date



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Program Policies:

- Unless otherwise noted, all programs are for individuals ages 18 and older, who are blind or have various levels of visual impairment. Participants ages 14-17 may register with office approval.
- For events listed as family events, family members of participants are eligible to participate. Programs fees still apply.
- The only way to secure your registration is by making payment to the City of Raleigh (checks, money orders or credit card accepted).
- Unless otherwise noted in the program description, registration for programs will be accepted until noon on the last business day BEFORE the program IF space is available.
- Registration/cancellation (see Refund Policy below) may be left on voicemail. Please clearly leave your name, the event and event date, whether or not you need transportation (if applicable), when/how to expect your payment and your contact information.
- All participants must complete and sign a Participation Form before participating in any activity. These forms are valid for one year.
- Transportation will only be available for individuals ages 8+ or those who meet the 80 lb. requirement for not needing a booster seat.
- Drivers will only make stops predetermined by the office, except in emergency situations.
- Program volunteers or personal assistants must be approved by office staff prior to attending programs. Additional paperwork may be required and may take up to 2 weeks for processing.
- There must be a minimum of 8 participants registered for any program to run.
- Please remember that our Van Drivers are not responsible for collecting any money for programs, so please be sure your payment is received in advance by the office.
- It is our policy to pick up participants up to 2 hours before the scheduled event, based on the number of participants riding. Please be ready 2 hours prior to the program time, staff will call before arrival.
- All program participants should be able to meet and load the vehicle without assistance. Drivers may not leave the vehicle unattended.
- All program participants must be able to function appropriately in a social setting.
- All participants riding City vehicles are required to wear seat belts while the vehicle is in motion.
- No smoking on vehicles or City of Raleigh property, unless in designated smoking areas.
- Open food or drink is not allowed on the vehicle.
- No profanity will be allowed on the vehicle or at programs.
- Please refrain from wearing strong cologne or perfume to respect those with allergies.
- Only registered participants, staff and approved volunteers/personal assistants are authorized to ride transportation.

Refund Policy:

- 100% refund/credit/transfer if the department cancels a program, 100% credit or transfer of fees to another program at time of withdrawal or 85% refund based on total cost of program;
- Refund/credit/transfer requests received less than 14 days prior to the start date of a program will not be granted;
- Refunds for medical reasons requested prior to the start date of a program will be granted at 100%, subject to verification;
- A credit may be used by any family member on the same registration account;
- Non-attendance/non-participation in a program does not entitle a patron to a refund.