



Corning Recreation Department Adult Registration

Program _____

Name _____

Address _____

Phone: Home _____ Work _____

Email _____ @ _____

Player T-Shirt Size (**Please Circle One**) Youth: S M L Adult: S M L XL

EMERGENCY INFORMATION

Any Allergies _____

Special Instructions _____

Emergency Contact Person _____

Emergency Contact Person Telephone _____

CORNING RECREATION DEPARTMENT AGREEMENT, WAIVER, & RELEASE:

In consideration for being permitted by the Corning Recreation Department to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge, in advance, the Corning Recreation Department (its officers, employees, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents, and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity.

The Corning Recreation Department has my permission to use my photograph, video and audio recordings, likeness, artwork, profile and/or story in this and future publications, web pages, and other promotional materials produced, used by, and representing the Corning Recreation Department. I understand the circulation of the materials could be worldwide and that there will be no compensation to me for this use.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE CORNING RECREATION DEPARTMENT, AND I SIGN IT OF MY FREE WILL.

Signature _____ *Date* _____

Registration can be mailed to: Corning Recreation Department, 794 Third St., Corning, CA 96021. For more information call Corning Recreation Department, 824-7011