

GENERAL REGISTRATION WAIVER

FOR ALL CLASSES, EVENTS AND ACTIVITIES

August 30, 2021 - June 17, 2022

ACKNOWLEDGEMENT, RELEASE & INDEMNIFICATION

(must be signed before participating in any event or activity)

By signing below or electronically and submitting this registration, I acknowledge that there are risks associated with my or my child's participation in any programming including injury, death or exposure to illness such as Covid-19 and I agree to assume the full risk of any injury, illness or death. Additionally, I hereby hold harmless and release and agree to indemnify and not to sue the City of Huntington Woods and its officers, agents, volunteers, employees and instructors with respect to any and all liability, claims, losses, demands, suits, causes of action, and damages on account of injury, illness or death to me, my child, or any other person or damage or loss to any property, whether caused by any negligent, grossly negligent or tortious act or omission of the City of Huntington Woods and its officers, agents, volunteers, employees or instructors or otherwise, in connection with the events, activities, programs and classes identified above, or the use of any facility or equipment in connection with same. This Release, Waiver, and Assumption of Risk shall be binding upon my heirs and dependents.

SPECIAL ACCOMMODATIONS

Should anyone require special accommodations to attend or participate in a Huntington Woods program or activity, please call 248-541-3030 at least 48 hours prior to the activity. The scope of the activity may require the participant to be accompanied by an individual who can provide one-on-one assistance.

PHOTO/VIDEO AUTHORIZATION

In signing up for a program with the Huntington Woods Parks & Recreation Department, I hereby give my consent to use photos/video coverage of myself and/or minor child in future newsletters, calendars, flyers, website and/or other social media. **Should you choose to opt out, please initial here _____.**

Printed Name(s)

of Participant(s) _____

Signature of adult participant or parent/guardian of child participant(s)

_____ **Date** _____