WPD PROGRAM REGISTRATION

Use the registration form below for fax, drop-off or mail-in registration. You may also register via the internet. Drop-off or mail to: Wildwood Park District, 33325 Sears Blvd., Wildwood, IL 60030. Phone #847-223-PARK(7275). Fax # (847) 223-2820. Internet registration can be located at www.WildwoodParkDistrict.com.

You will be notified if, for any reason we are unable to complete your registration. If you do not hear from us, your registration has been processed.

REFUND POLICY: Requests for refunds from any program must be made no later than 5 working days prior to the first class. Refunds will be sent in about 15 days. Please note there is a 20% (maximum $10) processing fee on all refunds. However, if a class is canceled due to insufficient registration, participants will be notified and the entire fee returned. No refunds will be issued once a class has started without a medical excuse.

Please mark your calendars! The park district does not send activity reminders. There is a $5 fee to switch sessions without a medical excuse.

RESIDENTS: Reside in Wildwood (except Royal Oaks), Wildwood II and Country Faire. All others are Non-Residents.

Waiver & Release of all Claims: As a participant I acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries, including death, damages or loss which I may sustain as a result of participating in any and all activities connected with or associated with such program. I assume full responsibility to inform the instructor of any physical/medical condition that may affect participation. I agree to and relinquish all claims I may have against the Wildwood Park District and its officers, agents, servants and employees as a result of participating in the program. I do hereby fully release and discharge the park district and its officers, agents, servants and employees from any and all claims from injuries, including death, damage or loss which I may have as result of my participation in the program.
I have read and fully understand the above waiver and release of all claims.

X_____ _____
Signature of participant or parent of minor age participant **Date**

Photo Policy/Waiver: Wildwood Park District staff may photograph participants enrolled in programs, classes, events or enjoying park facilities. These likenesses may be used in WPD publications, brochures and future recreation materials or advertisements. All photos taken on WPD property are for WPD use and become the sole property of the WPD. Names & other personal information will not be released during usage without prior permission from participants/parents/guardians.

_____ I give the WPD permission to photograph listed participants. **_____ I DO NOT give the WPD permission to photograph listed participants.**

Emergency Contact Name, Relation & Phone Number #1: _____

Emergency Contact Name, Relation & Phone Number #2: _____

In case of an emergency, may participant be taken to the nearest hospital by rescue squad? _____
Attach a description of any physical limitations, allergies, treatment instructions or any other important information.

Name of Adult/Guardian	Home Phone	Work/Cell Phone	WPD Res/Non Res

Street Address	Town	Zip Code

Name	Age/D.O.B.	Male/Female	Class Name	Class #	Start Date	Day	Start Time	Class Fee

Payment Details:
(__) CASH (__) CHECK _____ Check # (__) CREDIT CARD – Visa, Mastercard, American Express & Discover accepted. **TOTAL AMOUNT DUE:_____**

_____ _____ _____
Credit Card Number **Exp. Date** **Cardholder's Signature**