



MB DOLPHINS REGISTRATION FORM



PLEASE PRINT ALL INFORMATION

MAIN CONTACT FULL NAME:

First		Last	
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RESIDENTIAL ADDRESS:

Street			
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City		Zip	
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E-mail Address			
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Phone - Home		Extension	
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Phone - Work	()	Extension	
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Phone - Cell	()	<input type="checkbox"/> Yes, I agree to receive text messages. Cell service provider is:
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Check here if this is a new address / phone number

Participant Name	Child's DOB	Age	Sex M/F	Activity #	Activity Name	Activity Fee
				19207	MB Dolphins Swim Team	<input type="checkbox"/> \$225 residents <input type="checkbox"/> \$250 nonresidents
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				19207	MB Dolphins Swim Team	<input type="checkbox"/> \$225 residents <input type="checkbox"/> \$250 nonresidents
				19207	MB Dolphins Swim Team	<input type="checkbox"/> \$225 residents <input type="checkbox"/> \$250 nonresidents
				19207	MB Dolphins Swim Team	<input type="checkbox"/> \$225 residents <input type="checkbox"/> \$250 nonresidents
Please identify any special accommodations that are needed to improve the student's experience here:						GRAND TOTAL =

OFFICE USE ONLY: RECEIPT NUMBER

Cash Check - Print Check Number:

Credit Card Number:

Expiration Date: Month/Year: Security Code:

Cardholders Signature:

RELEASE OF LIABILITY I hereby certify that I am a participant in the above listed course conducted by the City of Manhattan Beach Parks & Recreation Department. I further certify that I am of good health, have no physical or other impairment which would endanger me when participating in such a program. I absolve and hold harmless the City of Manhattan Beach, its employees, officers or agents from any liability which may result from my participation or that of any minor in my legal custody, in the above activity. If the participant is a minor, I also give my permission for his/her participation in the above activity, and for any necessary medical treatment. I understand the City of Manhattan Beach has no obligation to supervise my children at the close of the above activity, and I release the City of Manhattan Beach, its officers, employees and agents from any liability resulting from any lack of supervision of my children at the close of the above activity. Participants involved in Manhattan Beach Parks & Recreation programs/activities may be photographed and such photography may be used to publicize City programs/activities. City of Manhattan Beach staff are not responsible for storing and or providing medications of any kind for participants in Parks and Recreation classes and activities.

Participants, Parent or Guardian Signature Date