



## PARKS, RECREATION AND COMMUNITY SERVICES DEPARTMENT

### JaxParks 2023 Aqua Tots Registration Form Cecil Aquatic Center

Please circle session and time

	<b>Session 1</b> (June 20 – June 23) (June 26 – June 29) Classes are Monday-Thursday (Friday will be a make-up day, if needed for holidays, etc.)	<b>Session 2</b> (July 3 & – July 5 - 7) (July 10 – July 13)
<b>Time:</b>	10-10:30 a.m.	11-11:30 a.m.      6-6:30 p.m.

**FEE:** \$60 per two-week session. Participants determined by enrollment cap, accepted on a first come, first served basis.

#### PARTICIPANT'S NAME

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ (Aqua Tots is for ages 3-5)      Male \_\_\_\_\_ Female \_\_\_\_\_

#### PARENT or GUARDIAN'S NAME

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Please indicate who will be responsible for bringing your child each day?:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

**DESCRIBE ANY MEDICAL PROBLEMS**, allergies, medications, or any conditions of the participant of which we should be aware of: \_\_\_\_\_

Physician's Name \_\_\_\_\_ Telephone \_\_\_\_\_

#### Please read and initial you understand the following policies:

By checking each box below, you agree that you have read and understand the statements.

\_\_\_\_\_ Eight lessons per session are guaranteed. JaxParks reserves the right to change the dates, times, and location for regularly scheduled or make up lessons.

\_\_\_\_\_ Once participant has attended one lesson, no refunds will be given unless a doctor's note or other proof of reason is provided and approved by JaxParks Aquatics Administration.

\_\_\_\_\_ If a lesson is held and you are unable to attend, a make-up lesson will not be given.

#### Please read and initial you understand the following refund policy:

\_\_\_\_\_ A \$20 administration fee will be assessed for each participant requesting a refund.

#### GENERAL RELEASE OF LIABILITY

I hereby release and agree to hold harmless the **City of Jacksonville, Parks, Recreation and Community Services Department**, its employees and sponsors, from all liabilities and claims that may accrue from injury to my child or property. I further hereby give my release for field trips and the publishing of any and all photographs or likeness. I also give my permission to make the necessary arrangements to provide emergency care and treatment for my child if an accident or serious illness occurs. I also understand that falsification of information detailed on this application about my child's age will result in immediate termination of my child from lessons.

Signed \_\_\_\_\_ Date \_\_\_\_\_