

El Segundo Recreation & Parks Department Swim Lesson Registration Lottery Form

PARENT'S NAME _____ REC I.D. # _____ DOB _____ CELL PHONE _____
 ADDRESS _____ CITY _____ ZIP _____ HOME PHONE _____
 EMAIL _____ WORK PHONE _____
 EMERGENCY CONTACT PERSON: _____ EMERGENCY CONTACT PHONE _____



OK if students are registered for different days and/or times? YES! No Thank You



STUDENT'S NAME			DOB		REC I.D. #	
	COURSE #	COURSE NAME	DAY	TIME	FEE	
1 st CHOICE						
2 nd CHOICE						
3 rd CHOICE						
STUDENT'S NAME			DOB		REC I.D. #	
	COURSE #	COURSE NAME	DAY	TIME	FEE	
1 st CHOICE						
2 nd CHOICE						
3 rd CHOICE						
STUDENT'S NAME			DOB		REC I.D. #	
	COURSE #	COURSE NAME	DAY	TIME	FEE	
1 st CHOICE						
2 nd CHOICE						
3 rd CHOICE						

The undersigned hereby agrees to defend, indemnify, and hold harmless the City of El Segundo and its Officers, Employees, and Agents from and against any and all loss, liability, charges, and expenses (including attorney's fees) and cost which may arise by reason of participation in any program. The City does not provide accident, medical, liability, worker's compensation insurance, or any other insurance for program participants. As parent/guardian, I hereby consent to emergency treatment of my minor child as a result of accident or injury. I further agree to pay any and all costs incurred as a result of said treatment. I agree to carefully inspect and satisfy for myself that the facilities provided are reasonably safe for their intended use. Once having conducted the inspection, I agree to expressly assume the risk of participating at the premises. I understand the City retains the right to use photos taken during activities for publicity purposes. The undersigned hereby agrees to conduct themselves in an appropriate manner while participating in any City of El Segundo program, activity, event, or class. Furthermore, the undersigned agrees to abide by the City of El Segundo Code of Conduct at all times (copies posted & available at Recreation facilities).

SIGNATURE _____ DATE _____

Credit Card payments are recommended to allow for prompt registration upon being selected in the lottery. Checks will be accepted, but may cause delay if the total amount varies due to full classes. Please, no cash.

VISA
 MC
 AMEX (STAFF USE ONLY _____)
 CHECK # _____ (PAYABLE TO CITY OF EL SEGUNDO)
 ACCOUNT CREDIT

CARD# _____ EXPIRATION DATE _____ CVV _____ NAME ON CARD _____