



ACTIVITY REGISTRATION FORM

Three options are available for activity registration:

- Website: [www.twp.pine.pa.us](http://www.twp.pine.pa.us)
- Hand-deliver to the Pine Community Center Front Desk, or
- Mail to the Pine Community Center, 100 Pine Park Drive, Wexford, PA 15090

Each program has limited spaces to ensure quality. First come-first serve basis. One registration form required for each student. We do not accept phone registrations. Please make checks payable to: Pine Community Center. (There is a minimum \$20.00 fee for all returned checks.) Pine Community Center reserves the right to cancel class for low attendance or any other unforeseen reason, and, if possible, will give a 24-hour notice of cancellation. Registration is non-refundable & non-transferable.

(Please Print)

Program Name: \_\_\_\_\_ Program Time: \_\_\_\_\_  
Membership Fee: \_\_\_\_\_ Program Day: \_\_\_\_\_  
Non-Membership Fee: \_\_\_\_\_  
Participants Name: \_\_\_\_\_  
Adult \_\_\_ Child \_\_\_ Date of Birth \_\_\_\_\_ Gender: M \_\_\_ F \_\_\_  
If child, name of parent/guardian: \_\_\_\_\_ Email address: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell: \_\_\_\_\_  
Name of Emergency Contact: \_\_\_\_\_  
Emergency Contact Phone: Home \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
Does participant have any allergies or chronic health problems? If yes, please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Payment Information (office use only)**

Credit Card: MC \_\_\_ Visa \_\_\_ AMEX \_\_\_ Credit Card # \_\_\_\_\_ CSC \_\_\_\_\_ Exp. Date \_\_\_\_\_  
 Cash: \$ \_\_\_\_\_  Check# \_\_\_\_\_

I understand that for promotional purposes the Pine Community Center videotapes and/or takes photographs of program participants and facility users. I hereby release and permit the Center to utilize for said promotional purposes any videotapes and photographs of my child or myself engaged in facility activities and/or general facility use.

\_\_\_\_ (member's initials)

**WAIVER**

In consideration of and agreeing to, on behalf of both myself, on my membership account, and my minor child(ren), participate in recreation and fitness activities at the Pine Community Center, I agree as follows:

I fully understand and acknowledge that recreational and fitness activities have (a) inherent risks, dangers, and hazards and such exists in the use of any equipment and the participation in these activities; (b) both my own and my minor child(ren)'s participation in such activities and/or use of such equipment may result in injury or illness including, but not limited to bodily injury, disease, strains, fractures, partial and/or total paralysis, death or other ailments that, could cause

(over)

**PINE COMMUNITY CENTER  
ACTIVITY REGISTRATION FORM**

serious disability; (c) these risks and dangers may be caused by the negligence of the agents, officers, representatives, employees, or volunteers of the Township of Pine and the Pine Community Center, the negligence of the participants, the negligence of others, accidents, breaches of contract, or other causes; (d) in consideration of and by my participation and my minor child(ren)'s participation in these activities and for both my and their use of equipment, I hereby (and also on behalf of my minor child(ren)) voluntarily assume all risks and dangers and all responsibility for any injuries, losses and/or damages of any kind whatsoever, whether caused in whole or in part by the negligence or the conduct of the agents, officers, representatives, employees, or volunteers of the Township of Pine and Pine Community Center, or by any other person.

I, on behalf of myself, my minor child(ren), my personal representatives and my heirs, executors, and administrators, hereby voluntarily agree to release, waive, discharge, hold harmless, defend, and indemnify the Township of Pine and the Pine Community Center and its their agents, officers, representatives, employees, and volunteers from any and all demands, claims, causes of action, liability, or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise from any cause whatsoever and including those arising in anyway from my or my minor children(ren)'s use of any equipment or participation in these activities. I specifically understand that I am releasing, discharging, and waiving any demands, claims or causes of action that I or my minor child(ren) (or my above-stated representatives) may have presently or may have in the future for the negligent acts or other conduct by the agents, officers, representatives, employees, and volunteers of the Township of Pine and of the Pine Community Center.

Intending to be legally bound, I have read and understand the above waiver and release and by signing it voluntarily agree to its terms. It is my express intention to exempt and release and hold harmless the Township of Pine, the Pine Community Center and their agents, officers, representatives, employees, and volunteers, from any and all liability for personal injury, property damage or wrongful death (to either myself, or to my minor child(ren)) caused by their negligence or by any other cause.

---

**Signature**

---

**Date**