

READ and SIGN THIS WAIVER and RELEASE OF LIABILITY INDEMNIFICATION

In applying for registration in the program and facility, the following agreements must be endorsed:

1. I agree on behalf of myself and in behalf of my minor children to release and discharge the Fairview Township School District, Fairview Township, Fairview Recreation Authority, its officers, representatives, and employees from any and all liability and claims arising out of or in any way connected with any program being operated by the Fairview Recreation Authority. The applicant hereby assumes all risks of injuries or damages to the person on behalf of myself and any minors to which I am a parent or guardian which might occur as a result of participation in the program of the Fairview Recreation Authority.
2. I agree to abide by the regulations for operation of the facility used for the program, and regulations for the registered individual activity.
3. I further hereby agree to indemnify and save harmless the Fairview School District, Fairview Recreation Authority, Fairview Township, its officers, representatives and employees, from any and all liability that may occur to myself or members of my immediate family in any Fairview Recreation Authority program. This indemnification is to include and it not necessarily limited to any and all cost of litigation, medical expenses, judgment, or subrogation interests.
4. I acknowledge that passes and registrations may not be loaned or transferred: the permit and privileges associated with it are not transferable as acceptance of above of the above items. **THE SIGNATURE OF PARENT, GUARDIAN OR ADULT PARTICIPANT INDICATES ACCEPTANCE OF THIS WAIVER AND RELEASE OF LIABILITY AND INDEMNIFICATION.**

The **WAIVER AND RELEASE OF LIABILITY** must be signed before participation by adult participants or by a parent or guardian on behalf of minors. The Fairview Recreation Authority, Fairview Township and its Supervisors and the Fairview School District assume no liability for injuries that may be suffered as a result of participation in these activities as well as and including transportation to and from any class or program.

If you have read, signed and agree to the Waiver and Release of Liability, fill out the registration form to include all necessary information, (name, address, telephone number, class, etc.)

**MAKE YOUR CHECK OR MONEY ORDER PAYABLE TO:
THE FAIRVIEW RECREATION AUTHORITY
and mail to:
7471 McCray Road, Fairview, PA 16415-0074**

REGISTRATION and WAIVER FORM - FILL OUT COMPLETELY

(FILL OUT, SIGN AND MAIL THIS REGISTRATION WITH CHECK MADE PAYABLE TO: *Fairview Recreation Authority*, 7471 McCray Road, Fairview, PA 16415-0074)

Participant Name	Age	Activity	Session	Time	Fee

T-Shirt Size: _____ **Total** _____
 Sm Med _____ **Check**
 Lg Xlg _____ **Number** _____

FAMILY NAME _____

PRINT ADDRESS _____

HOME PHONE# _____

WORK PHONE# _____

MEDICAL CONDITION INSTRUCTOR SHOULD BE AWARE OF:

I HAVE READ AND UNDERSTAND WAIVER ON REVERSE SIDE.

Signature _____ **Date** _____