

**O'Fallon Parks & Recreation Dept.**

Office Address: 308 East 5th Street  
Mailing Address: 255 South Lincoln Street  
Phone Number: (618) 624-0139



**REGISTRATION:**

In order to record your family in our new computer registration program, please supply the following information. *Please print all information.*

**1. HOUSEHOLD CONTACT:** adults responsible for sign-up and payment

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

Home Phone Number: \_\_\_\_\_ Alternative Phone Number: \_\_\_\_\_

**2. PROVIDE INFORMATION ON ALL PARTICIPANTS:** If you have already supplied this info, you may skip to #3.

Name	Birth Date	Sex	School Grade	Health Concerns <i>(continue on back if needed)</i>
		M F		
		M F		
		M F		
		M F		

**3. I WOULD LIKE TO REGISTER FOR:**

**Hong Martial Arts Program Options (check one):**

3 Month Children's Introductory Special with FREE uniform - **\$175.00** (2 days a week - ages 6 and up - fee due at sign-up)

6 Months - 2 days a week - **\$300.00** (due in 2 installments)

(FREE UNIFORM for new students only) - Fee can be paid in full at signup or in two installments (balance must be paid off two months after start date)

1 Year - 2 days a week - **\$500.00** (due in 3 installments)

FREE UNIFORM – fee can be paid in full or in 3 installments – must be paid off within 3 months of start date

Black Belt Program - **\$1450.00** (\$300.00 due at signup balance due within 11 months)

**PLEASE MAKE CHECKS PAYABLE TO:** O'Fallon Parks & Recreation Dept.

**4. PAYMENT METHOD:** CASH AMOUNT: \_\_\_\_\_ CHECK#: \_\_\_\_\_ CHECK AMOUNT: \_\_\_\_\_ DATE: \_\_\_\_\_

**5. Waiver and Release of All Claims:**

Please, read this form carefully and be aware that in signing up and participating in this program, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program (including transportation services/vehicle operations, when provided).

I recognize and acknowledge that there are certain risk of physical injury to participants in this program, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program against the O'Fallon Park and Recreation Department including its officials, agents, volunteers, and employees (hereinafter collectively referred to as the Park/Rec Dept.)

I do hereby fully release and forever discharge the Park/Rec Dept. from any and all claims for injury, damages or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with this program.

Warning of Risk: Recreational programs are intended to challenge and engage the physical, mental, and emotional resources of each participant. Despite careful and proper preparation, instruction, and medical advice, conditioning, and equipment, there is still a risk of serious injury when participating in any recreational program. Understandably, not all hazards and dangers can be foreseen. Depending on the particular activity, participants must understand that certain risk, dangers, and injuries due to inclement weather, slipping, falling, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate defective equipment, inadequate supervision, instruction or officiating, and all other circumstances inherent to indoor and outdoor recreational programs exist. In this regard, it must be recognized that it is impossible for the Parks/Rec Dept. to guarantee absolute safety.

**MUST BE SIGNED by Participant (if 18 years of age or older) or Parent and/or Legal Guardian**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_