



GLASSELL PARK SENIOR CENTER

3750 VERDUGO ROAD, LOS ANGELES, CA 90065

PHONE: (323) 550-8809 EMAIL: GLASSELL.SENIORCENTER@LACITY.ORG



(PLEASE FILL OUT COMPLETELY)

LAST NAME _____ FIRST NAME _____

BIRTHDATE ____/____/____ ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE: _____

EMERGENCY CONTACT

NAME _____ PHONE: _____ RELATION _____

NAME _____ PHONE: _____ RELATION _____

ACKNOWLEDGEMENT OF POLICIES AND RELEASE OF LIABILITY

LIABILITY & MEDICAL ATTENTION

I, the undersigned, agree to relieve the City of Los Angeles, Department of Recreation and Parks, its officers, agents, and employees from any liability from injuries to myself and/or any above listed participant in connection with activities in this program. I understand that the Senior Center carries NO INSURANCE.

PHOTO RELEASE

By registering I agree to allow the City of Los Angeles, Department of Recreation and Parks, Glassell Park Senior Center, it's agents and assigned representatives to use photographs, video tapes, and testimonials of participants for use in publicity materials free of any fee or usage charge. As it is difficult to pull individuals out of photographs and film, I understand that there is not an option for myself to be excluded.

REFUNDS

I understand that there are **NO REFUNDS** or transfers of registration fees or annual passes. A nonrefundable 15% administration fee will be assessed per participant for any refund, change, or transfer between classes. No refund will be issued unless the class is cancelled by Glassell Park Senior Center. Refunds can take from 4-8 weeks to be received.

I acknowledge that I have read all of the policies as listed on this page of this registration form. By my participation I agree to follow and abide by these policies.

Signature

Print Name

Date

