

**BREMERTON PARKS & RECREATION  
ACTIVITY REGISTRATION FORM**

**WINTER/SPRING 2007**

**MAIL TO:** 680 Lebo Blvd., Bremerton, WA 98310

**FAX TO:** 360-473-5882

**ON LINE:** [www.ci.bremerton.wa.us](http://www.ci.bremerton.wa.us)

Check One:	<input type="checkbox"/> New Customer	<input type="checkbox"/> Returning Customer	<input type="checkbox"/> Information Updated
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Last Name		First Name	
Street Address		City	State      Zip
Daytime Phone:		Evening Phone:	Email Address:

Participant's Name	Birthdate	Activity Title	Course #	Fee

**Mastercard**    **VISA** card #: \_\_\_\_\_ Exp Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Total Fees:

**Waiver of Liability and Hold Harmless:** In consideration for being allowed to participate in a City of Bremerton Parks and Recreation program, I, hereby, for myself, my child, my heirs, executors and administrators, agree to waive any claims, release and hold harmless the City, its officers, officials, employees, agents and volunteers including class instructors, for any and all claims, injuries, damages, losses or suits, including all legal costs and attorney fees, arising out of or in connection with my participation in classes and activities with the Bremerton Parks and Recreation Department, now or in the future. I hereby agree to fully comply with the rules and regulations for participants, established by the City of Bremerton and I fully understand that I may sustain injury as a result of my participation in these activities.

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_