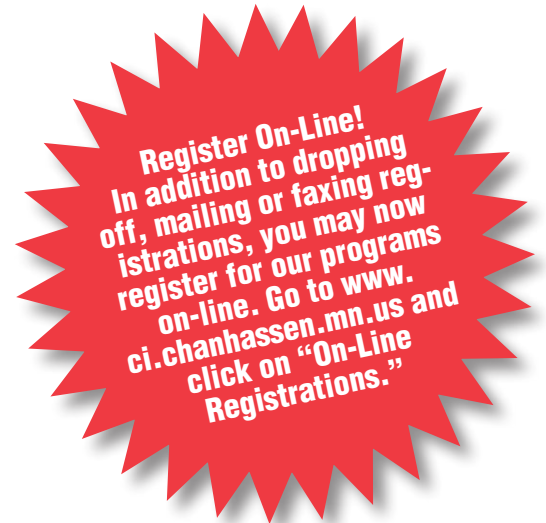


Program Registration

Registration Instructions

- Fill out the registration form below. Be sure to include the code number (if listed) and date of birth of each participant.
- Registrations must be received before classes begin. Instructors cannot accept registrations at class. The registration deadline on the program refers to the last day registrations can be accepted. If the class is filled before that date, it is considered closed.
- The City of Chanhassen guarantees that you will be satisfied with our recreation programs. In the event you are not 100% satisfied, our staff will listen and make every attempt to meet your expectations. In the event we fail at these attempts, you will receive full credit for another program of your choice, or a full refund.
- Registrations cancelled up to four days prior to the start of the program will receive a refund. Advance costs incurred by the city for admissions, meals, transportation, etc., will be deducted from the refund amount. Cancellations received after this time will receive a 50% refund.
- Class times/dates are subject to change without notice.
- Payment is due at registration – checks, cash, Visa, MasterCard, American Express & Discover are accepted.
Make checks payable to: City of Chanhassen.
There is no confirmation for mailed or dropped off registrations.
- Fax (include credit card number), mail, or drop off your registration form to:

City of Chanhassen 7700 Market Blvd., PO Box 147 Chanhassen, MN 55317 Phone 952-227-1100 Fax 952-227-1110	Chanhassen Recreation Center 2310 Coulter Blvd. Chanhassen, MN 55317 Phone 952-227-1400 Fax 952-227-1404
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Waiver of Liability I, the undersigned, parent, guardian or participant, do hereby agree to allow the individual(s) named herein to participate in the above-mentioned activity(ies) and I further agree to indemnify and hold harmless from and against any, and all liability for injury which may be suffered by the aforementioned individual(s) arising out of, or in any way with, his/her participation in this activity. I do hereby allow the City of Chanhassen to use any photographs (taken by the city) of the individual(s) named herein in city informational bulletins released to the general public.

Data Privacy Policy The information requested on the registration form will be used to verify eligibility and determine staff, facility, and equipment needs. You/your child's name, sex, birthdate, address, phone number and health information will be provided to city staff, volunteers, the city attorney, insurer and auditor. Although you are not legally required to disclose this information, failure to do so will prevent you/your child from participating in the program.

Your Name (list parent or guardian if under age 18) _____

Address _____

City & Zip Code _____

Daytime Phone Home Work Cell _____

Email Address _____

Participant's Name(s)	Sex	Birthdate	Program Name	Code #	Fee

Total Amount Due at Registration

Does the participant have any special needs? No Yes (please explain on a separate sheet).

Check Cash Visa/MasterCard American Express Discover Number: _____ Expires _____