



Tiny Tots Preschool Program (Ages 3-5)

REGISTRATION FORM - 2023/2024

Child's Name: _____ Date of Birth: _____ Gender: _____

Social Experiences (Age 3 on or before 8/31/2023) Kindergarten Readiness (Age 4 on or before 8/31/2023)

Parent's Name: _____ Email Address: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Receipt Needed: Printed Emailed Office Receipt #: _____

Program Dates: August 21, 2023 - May 24, 2024

Hours: 9am - 12pm

Closure Dates: 9/4, 10/2, 11/9, 11/10, 11/20 – 11/24, 12/22 – 1/8, 1/15, 2/19 – 2/23, 3/25 – 3/29, 4/26

FEES:

Social Experiences (3-4 years old) T/Th
Participants must be 3 on or before 8/31/2023

Monthly Fee: \$180 (R), \$190 (NR)

Note: August/September are combined and include a \$50 non-refundable registration fee making that month a total of \$230 (R), \$240 (NR)

Kindergarten Readiness (4-5 years old) M/W/F
Participants must be 4 on or before 8/31/2023

Monthly Fee: \$240 (R), \$250 (NR)

Note: August/September are combined and include a \$50 non-refundable registration fee making that month a total of \$290 (R), \$300 (NR)

PAYMENT: Payment must accompany registration. Monthly fees are due no later than the 20th of each month. If fees are not collected by the deadline, the spot will be forfeited to the next family on the waitlist.

Check Month: August/September October November December January
 February March April May

Total Amount Due: _____

Payment Type: Check # _____ Cash Credit M/O

CREDIT: Card Number: _____ Expiration Date: _____

Signature: _____ CVV: _____



CRPD Tiny Tots Preschool Program August 21st 2023 – May 24th 2024



AGREEMENT, WAIVER, AND RELEASE

In consideration for being permitted by the District to participate in the above-referenced activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the District (including its officers, employees, volunteers, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of active or passive negligence or carelessness on the part of the persons or entities mentioned above.

It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs, administrators, executors, and assigns and that I shall indemnify and hold the District (including its officers, employees, volunteers, and agents) free and harmless from any loss, liability, damage, cost, or expense which may arise out of or connected in any way with my participation in said activity.

Additionally, I fully understand that my participation in the above-referenced activity exposes me to the risk of personal injury, death, communicable diseases, illnesses, viruses, and/or property damage. I hereby acknowledge that I am voluntarily participating in this activity and agree to assume any such risks.

PHOTO and LIABILITY RELEASE: By signing this agreement, you are agreeing to release photo rights, including waiving any right of compensation, to Carmichael Recreation & Park District (CRPD). CRPD reserves the right to photograph facilities, activities, and program participants for potential future use, which may include sharing the photos with the Carmichael Recreation and Park District Foundation dba Carmichael Parks Foundation to use the photos to inform and promote the CRPD. **You further hereby release CRPD and Carmichael Parks Foundation from and against any injury or damage arising out of or related to the aforementioned activities.** All photos will remain the property of Carmichael Recreation & Park District.

PARENTAL/GUARDIAN CONSENT: (to be completed and signed by parent/guardian if Participant is under 18 years of age.)

I hereby consent that my child, _____, participate in the above-referenced activity, and I hereby execute the above Agreement, Waiver, and Release on their behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the District (including its officers, employees, volunteers, and agents) free and harmless from any loss, liability, damage, cost, or expense which may arise out of or connected in any way with said minor's participation in said activity.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT AND I SIGN IT OF MY FREE WILL.

Signature

Name (Printed)

Date

HEALTH HISTORY: