

OPEN GYM PARTICIPANTS

All open gym participants **must bring with them** an extra pair of shoes that will be worn **only in the gym**. They will not be allowed to use the shoes that they wear into the school for use on the gym floors. If participants do not carry in an extra pair of shoes they will have to play in their socks. **Any individual caught hanging on basketball rims, bouncing, or throwing balls in the hallways will be sent home immediately.** Using these facilities is a privilege, and we must respect the rules and follow them accordingly. Open Gym dates and times are subject to change due to limited available of gyms. Thanks for your help and if you have any questions, please contact Randy Miller or Steven Story at the Parks and Recreation Department 357-7010.

Fee

\$1/open gym visit, payable at gym day of use.

PASSES: \$25 Individual unlimited gym use (during scheduled times)

Purchase season passes at City Hall or online at cityofclearlake.com.

Open Gym Registration Form

FIRST NAME _____ LAST NAME _____

ADDRESS _____

HOME PHONE# _____ DAYTIME# _____ CELL #: _____

E-MAIL _____ (please write neatly)

AGE _____ GRADE _____ GENDER (M or F) _____

PARENT/GUARDIAN NAME _____

EMERGENCY CONTACT NAME _____ Ph# _____

FOR FAMILY (list all family members):

Name _____ Age _____ Grade _____ Name _____ Age _____ Grade _____

Name _____ Age _____ Grade _____ Name _____ Age _____ Grade _____

Name _____ Age _____ Grade _____ Name _____ Age _____ Grade _____

By signing this agreement, I the participant, parent, and/or guardian understand that participation in this activity may result in some type of injury and protective equipment does not prevent all injuries to participants. I hereby give permission for my child, ward, or myself to participate in the below registered program and/or activity and certify that my child (or myself) is physically fit to join in the activities. I hereby waive, release, and agree not to hold the City of Clear Lake Parks and Recreation Department sponsors, supervisors, and volunteers liable for any injuries that may occur as a result of participation in these activities. I also give my permission for any photos/videos, etc. of these participants taken during a program to be used for future departmental promotional materials. Please take note and govern yourself accordingly.

THE CLEAR LAKE PARKS AND RECREATION DEPARTMENT AND THE CITY OF CLEAR LAKE HAVE NO ACCIDENT INSURANCE TO PROTECT THE PARTICIPANTS.

PARENT/GUARDIAN/PARTICIPANT SIGNATURE (REQUIRED) x _____ DATE _____

NO ONE IS ALLOWED TO PLAY WITHOUT SIGNED WAIVER. IF UNDER AGE 18, PARENT/GUARDIAN MUST SIGN.