



CITY OF LIBERTY LAKE RECREATION SERVICES REGISTRATION FORM

Address: 22710 E. Country Vista Drive; Liberty Lake, WA 99019 Phone: (509) 755-6726 Fax: (509) 755-6713

Participant Information	Name: _____
	Address: _____
	City/State: _____ Zip: _____
	Home/Cell: _____
	Email Address: _____

Photo Information	Title: _____
	Location Taken: _____
	Photo Size: <input type="checkbox"/> 5" x 7" <input type="checkbox"/> 8" x 10"

Program Name:	Date/Time:	Fee:
Winter Festival Photo Contest	N/A	\$0.00
TOTAL FEE:		\$ 0.00

LIABILITY WAIVER, RELEASE, & INDEMNITY AGREEMENT: I agree to release, indemnify, and hold the City, its agents, officers and employees harmless from any and all liability claims, actions, judgments, damages or injuries of every kind and nature whatsoever to the participant and/or his property arising from participation in activities for which the participant is registering. I further acknowledge that I have familiarized myself with the description of the activities, understand the hazards and the participant's personal limitations and knowingly assume all risks. I acknowledge I have read and understand this Liability Waiver, Release and Indemnity Agreement, and understand that I am waiving any claim I might have against the City for any harm sustained as a result of any activity for which I am registering a minor child. In case of an emergency I authorize permission for transportation to nearest and appropriate medical facility, and authorize emergency medical care if no one on this form can be reached. I give permission to the City of Liberty Lake to use any photos submitted for promotional purposes.

Signature (must be 18 years or older)

Date

Please visit our website for our privacy statement