



ROCKFORD PARK DISTRICT

RADIO CONTROLLED FLIGHT FIELD REGISTRATION FORM

PERMIT HOLDER INFORMATION

HH ID# _____

Last Name _____ First _____ Middle _____

Address _____ City _____ State _____ ZIP _____

Home Phone () _____ Cell Phone () _____ Work Phone () _____ Birth date _____ Sex _____

Parent/Guardian Name (if under age 18) _____ Work Phone () _____ Cell Phone () _____

Emergency Contact Name _____ Work Phone () _____ Cell Phone () _____

REGISTRATION REQUIREMENTS

Copy of AMA license # _____ (please attach copy to this form)



PAYMENT INFORMATION

(50% off after June 29th; after Sept 1 permit is for the following year)

INDIVIDUAL FEES \$40 Resident \$45 Non-resident \$35 Youth (12-18) 11 and under free
 Family membership: \$85 (for first three) \$25 Additional family members \$35 Non-flyer permit

Credit Card Number _____ Expiration Date _____ CVV/CVC code (3-digit # on back of card) _____

Signature (Authorization for Credit Card Use) _____

IMPORTANT INFORMATION

The Rockford Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Rockford Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program/activity must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or adequately skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or has recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

WARNING OF RISK

Model airplane flying is intended to challenge the mental and emotional resources of each participant. Despite careful and proper preparation, instruction, and equipment, there is still a risk of serious injury, including death. Certain risks include burns from gasoline fires, electrical shock and electrocution, tampering with engine fuel, being struck by a model airplane, failing to follow manufacturers' recommendations, inadequate or defective equipment, inadequate supervision or instruction, dangers and injuries due to inclement weather, and all other risks inherent to model airplane flying. In this regard, it is impossible for the Rockford Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Rockford Park District, including its officials, agents, volunteers and employees.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering online or via fax, my online or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Permit Holder's Name (PLEASE PRINT) _____

Signature (parent/guardian signature if under age 18) _____ Date _____

PARTICIPATION WILL BE DENIED if the signature of permit holder or parent/guardian, and date are not on this waiver.