	_		
Expiration	Date		



CITY OF SEMINOLE RECREATION COMPLEX MINOR (17 YRS & YOUNGER) GUEST APPLICATION

	Name:		
City:		State:	Zip Code:
Home Phone:		 F-Mail:	Zip code
	·	Date of Birth:	
	ency Contact Person:	Contact Relati	onship:
Emergency Co	ntact Phone Number:		
	Nan	ne	Date of Birth
	Minors Name:		
	Minors Name:		
absolve, defend from any and a equipment and f THIS RELEASE OMISSION OR OFFICERS, AG OWN FREE ACT	and hold harmless the City of Sen ill claims, damages, losses or inju facilities of the City of Seminole's R INCLUDES A RELEASE FOR AN R NEGLIGENCE, EITHER ACTIV ENTS, VOLUNTEERS, AND ELEC T AND WILL. ent/Legal Guardian	ninole, its employees, officers, a pries of any kind, resulting from ecreation Center Complex. Y AND ALL LOSSES OR INJUITE OR PASSIVE OF THE CITION OFFICIALS. THIS RELECTED OFFICIALS.	and I do hereby agree to waive, release, agents, volunteers, and elected officials in the participation in activities, use of RIES ARISING OUT OF ANY ACT OR Y OF SEMINOLE, ITS EMPLOYEES, ASE IS GIVEN AND SIGNED OF MY
promotion and ninclude media co	marketing of the City of Seminole R	Recreation Center's facility, prog eral public. By signing below, I	child(ren) and use these images in the rams, events, and activities, which may give my legal authorization for the City
Signature of Par	ent/Legal Guardian	 Date	
 Fighting Languag Drugs at Participa Behavior Participa Participa 	ents/Legal Guardian will be respons is prohibited ge and conduct deemed inappropria nd alcohol are prohibited on City pr ants under the influence shall be re r deemed abusive to staff, coaches ants shall not bring unauthorized gu ants shall not remove Recreation Co we the above rules may/will result in	ate by staff will not be allowed roperty moved from the facility officials, or other participants uests into the facility enter equipment from facility	
Member's Initials	 S		Office Staff's Initial