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This form must be completed in its entirety by an adult, 18 or older. If you do not wish to share your contact information	years	Online: http	Registration begins December 12 http://www.fayettecountyga.gov/parks_and_recreation/OnlineRegistration.htm			
the instructor, check here	or with	Mail: 140		nue West, Fay	etteville 30214	
Parent/Guardian Name:						
Address		City			_Zip	
Email Address	Home Phone	<u> </u>		Cell		
Please check the appropriate box for the location in	which you live:					
☐ City of Fayetteville ☐ Peachtree City	☐ Town of Tyre	one	Unincor	porated Faye	ette County	
☐ Town of Brooks ☐ Town of Woolsey	Another Cou	inty (add 50%	surcharge to	printed fee)		
Participant Name Activity T	itle Course C	ode Age	Date	Time	Fee	
				TOTAL		
WAIVER FOR PARTICIPANT  The undersigned participant or guardian acknowledge that participar against the Fayette County Board of Commissioners and all emplo child. By signing this release, I/the guardian consent to such partic event of an emergency and I cannot be reached, I give permission attention for myself/my child. I hereby consent to the use and reprivantsoever for use in the Fayette County Parks and Recreation ne publications produced for Fayette County Parks and Recreation Depublications listed above. I have read this document and am fully a Name	yees and members of the ipation and also verify the for authorities of Fayett oduction of any and all pessletter, brochures, flye partment. Consent is a aware of the contents and all pessletter, brochures, flye partment.	ne same, for any of hat adequate me e County Parks and/of ers, on the county also granted for ar and limitations, lega	claim arising out o dical insurance is not Recreation De or video clips take and department virtues of my name all and otherwise.	f any injury or da in effect during partment to seek n of me/my chilo veb sites, and in e/child's name in	amages to myself/ this period. In the a immediate medical I in any form any other	
Name_ Participant acknowledges by signature and date all information pro	vided is correct and acc	epts our cancella	tion and refund po	Date		
			dis			
All fees are payable in advance to Fayette County Parks a accompanied with a registration form. Acceptable forms o cards. Individuals must verify that their registration information	f payment are cash,	check, money o				
FCRD REFUND POLICY  1. Classes that do not attain the minimum enrollment wi refund.						
<ol> <li>Refunds will be given to participants if requested in w will be charged for any written request.</li> <li>Refunds will be given after a class/program/trip begin within five work days from the start of the class.</li> </ol>	Ü	,	. 0	•		
<ol> <li>If payment is made online with Paymentus, there will</li> <li>Regarding trips and charter bus trips that admission r ticket. No refunds for no-shows. Some of our trips had deprive someone else of being able to attend.</li> </ol>	must be paid in advar	nce, refunds wil	I only be given i at the last minut	f we can sell y e or do not sho	rour space and ow, you may	
All checks and money orders shot Processed by: Date:	uld be made paya Amou					
Date				····		