

Northville Community Center  
303 W. Main St.  
Northville, MI 48167

Contact Us:  
(248) 305-2851  
View our Programs:  
northvilleparksandrec.org



**Please read waiver and sign below:** I hereby grant permission to Northville Parks & Recreation and any other entities authorized by Northville Parks & Recreation to use any photographs, video tapes, and any other record of activities for legitimate purposes. I agree to release and hold harmless on behalf of myself, my child, and our representatives, the City and Township of Northville and their Parks and Recreation Department and the Northville Public Schools from liability for injuries and damages which I or my child may sustain while participating in this activity even if the injuries or damages are caused by the sole negligence of the City or Township or their Parks and Recreation Department or the Northville Public Schools. I understand that I am responsible for medical coverage for myself and my child.

**Refund Policy:** If Northville Parks & Recreation cancels any activity a full refund will be issued. If the participant cancels prior to the beginning of the first class a full refund will be issued less a \$15 processing fee. If the participant cancels after the 1<sup>st</sup> class a refund of 50% of the class fee will be issued. Cancellations made after the 2<sup>nd</sup> class meeting will not receive a refund. Fees with ticketed events, concerts, excursions & one-day activities are non-refundable. No refunds for missing any portion of a class or event due to vacation or scheduling conflict.

**Programs are subject to cancellation if minimum enrollment is not met. Register early to be sure your favorite activity is not canceled.**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Any Allergies, Special Needs, or Limitations? \_\_\_\_\_

Emergency Contact #1: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Emergency Contact #2: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Activity Name	Fee	Date and Time of Activity	Participant Name	Gender	Date of Birth

**Please make checks payable to Northville Parks and Recreation.**

Driver's license number (this is required to process the transaction): \_\_\_\_\_

Signature: \_\_\_\_\_

**\*This form must be filled out in its entirety in order to process registrations. If the form is not complete registration will not be processed and participant will not be enrolled in the course/class/trip.**