

registration form (ages 16+)

Participant's Name _____ Age _____ Birth Date _____ Gender _____

Listed are all programs in the order that they appear in the brochure. Please check only those programs for which you are registering. Any age restrictions are noted in parentheses. Circle transportation location where appropriate: AP = 737 Apts. DA = Darien DE = Denning LE = Lemont LI = Lisle SE = SEASPAR See transportation information and requirements on pages 17 or 30.

Code	Program	✓	Fee
Programs for Everyone			
1-001-01-1	Swim, Hilton, Mon., 4:30 p.m.		105
1-001-01-2	Swim, Hilton, Mon., 5 p.m.		105
1-001-01-3	Swim, The CORE, Mon., 5 p.m.		105
1-001-01-4	Swim, The CORE, Mon., 5:30 p.m.		105
1-001-01-5	Swim, Hyatt, Tue., 4:30 p.m.		105
1-001-01-6	Swim, Hyatt, Tue., 5 p.m.		105
1-001-01-7	Swim, Hyatt, Tue., 5:30 p.m.		105
1-001-01-8	Swim, Hyatt, Tue., 6 p.m.		105
1-001-01-12	Swim, Hyatt, Thu., 4:30 p.m.		105
1-001-01-13	Swim, Hyatt, Thu., 5 p.m.		105
1-001-01-14	Swim, Hyatt, Thu., 5:30 p.m.		105
1-001-01-15	Swim, Hyatt, Thu., 6 p.m.		105
1-001-01-16	Swim, Maple Hill, Thu., 4:30 p.m.		105
1-001-01-17	Swim, Maple Hill, Thu., 5 p.m.		105
1-074-01-1	Karate		82
1-008-01-2	Ice Skating		120
1-070-01-1	Horseback Riding, Hanson, 1 p.m.		100
1-070-01-2	Horseback Riding, Hanson, 1:30 p.m.		100
1-070-01-4	Horseback Riding, Holistic, 6/27-7/25 Time Selection: _____		350
1-070-01-7	Horseback Riding, Holistic, 8/1-22 Time Selection: _____		350
1-070-01-5	Horseback Riding, Holistic, 6/28-7/26 Time Selection: _____		350
1-070-01-8	Horseback Riding, Holistic, 8/2-23 Time Selection: _____		350
1-070-01-6	Horseback Riding, Holistic, 6/29-7/17 Time Selection: _____		350
1-070-01-9	Horseback Riding, Holistic, 8/3-24 Time Selection: _____		350
1-006-01-1	Music, Tue., Piano/Drums Time Selection: _____		144
1-006-01-3	Music, Wed., Piano Time Selection: _____		160
1-006-01-2	Music, Thu., Keyboard/Voice Time Selection: _____		160
1-041-01-2	Sunshine Through Golf		75
1-099-01-8	Sensory Sunday, 5-Visit Pass		25
1-099-01-9	Sensory Sunday, 12-Visit Pass		50
1-242-01-1	Eyes to the Skies Festival		Free!
Special Olympics			
1-121-01-1	Volleyball		175
1-104-01-1	Bocce, 5 p.m.		105
1-104-01-3	Bocce, 6 p.m.		105
1-112-01-1	Floor Hockey		170

Code	Program	✓	Fee
Special Olympics, Continued			
1-124-01-1	Flag Football		125
1-113-01-1	Golf		185
1-113-01-2	Golf (Non-Competitive)		150
1-113-01-3	Golf (Developmental)		130
1-118-01-2	Swimming (Pre-Season Practice)		70
1-118-01-3	Swimming (Developmental)		88
Programs for Individuals with Physical Disabilities			
1-050-08-1	Revelation Golf		40
1-050-09-1	Adapted Music Lessons Time Selection: _____		58
1-050-06-1	Power Soccer		42
1-050-12-1	Wheelchair Table Tennis		35
1-050-14-1	Adapted Sports Mini Camp		145
Programs for Teens & Adults (Ages 16+)			
1-007-01-3	Afternoon Adventures - DA LI SE		185
1-003-01-4	Healthy Hikers		52
1-002-01-3	Aqua Exercise & Healthy Snack		50
1-018-01-1	Miniature Golf (16-30)		78
1-018-01-2	Miniature Golf (30+)		78
1-046-01-1	Wrestle Mania - DE		50
1-007-01-1	Day Away Tour (21+)		210
1-012-01-1	Teen Scene (16-22) - DE LE SE		180
1-076-01-1	Role Play		40
1-014-01-1	Music Mania		70
1-034-01-1	BINGO!, 6/13-7/11		45
1-034-01-2	BINGO!, 7/18-8/8		45
1-015-01-1	Concert Series		127
1-039-01-1	Animal Assisted Therapy		38
1-099-04-1	Sensory Explorers Time Selection: _____		55
1-032-01-1	Summer Snacks		50
1-002-01-2	Adult Swim		60
1-016-01-1	Baseball Tour, 6/14 - DE LE SE		35
1-016-01-2	Baseball Tour, 6/28 - DE LE SE		35
1-016-01-3	Baseball Tour, 7/12 - DE LE SE		35
1-016-01-4	Baseball Tour, 8/16 - DE LE SE		35
1-019-01-1	At the Movies, Hodgkins		78
1-019-01-2	At the Movies, Woodridge		78
1-013-01-1	Weight Training		58
1-014-01-2	Glee Club		64
1-022-01-1	Picnic in the Park - DE LE		155
1-097-01-1	Young Adult Swim (16-22)		18
1-033-01-1	Yoga		97
1-025-01-1	Social Club		165
1-095-01-1	Young Adult Club (16-22) - DE LE SE		165

Code	Program	✓	Fee
Programs for Teens & Adults (Ages 16+), Continued			
1-026-01-1	Saturday Night Socialites (21+) - AP SE		175
1-009-01-1	Bike the Trails 101		30
1-027-01-1	Baseball Bonanza, 6/25 - DE LE		30
1-027-01-2	Baseball Bonanza, 7/2 - DE LE		30
1-027-01-3	Baseball Bonanza, 7/9 - DE LE		30
1-027-01-4	Baseball Bonanza, 7/30 - DE LE		30
Special Events for Teens & Adults (Ages 16+)			
1-201-01-1	Ladies' Day Out - DE LE SE		65
1-202-01-1	Barbra and Frank - DE LE SE		70
1-202-01-2	Barbra and Frank: Accessible - DE LE SE		70
1-203-01-1	White Pines Ranch Overnight		345
1-205-01-1	Scottish Festival & Highland Games - DE LE SE		58
1-206-01-1	Woodridge Jubilee - DE LE SE		42
1-208-01-1	The Tiki Terrace - DE LE SE		65
1-209-01-1	Racine Zoo - DE LE SE		60
1-210-01-1	Hawaiian Bash*		17
1-213-01-1	Cavalcade of Brass - DE LE SE		45
1-214-01-1	Ribfest - DE LE SE		55
1-215-01-1	Chicago Sky - DE LE SE		45
1-215-01-2	Chicago Sky: Accessible - DE LE SE		45
1-216-01-1	Chicago Cubs - DE LE SE		140
1-216-01-2	Chicago Cubs: Accessible - DE LE SE		140
1-218-01-1	Raging Waves Waterpark - DE LE SE		75
1-220-01-1	Bristol Renaissance Faire - DE LE SE		70
1-221-01-1	Bowlero - DE LE SE		65
1-223-01-1	Old Town Pour House - DE LE SE		55
1-225-01-1	Chicago White Sox - DE LE SE		95
1-225-01-2	Chicago White Sox: Accessible - DE LE SE		95
1-227-01-1	DuPage County Fair - DE LE SE		45
1-228-01-1	Movie in the Park*		15
1-230-01-1	Funfest - LE		25
1-231-01-1	Guys' Day Out - DE LE SE		75
1-232-01-1	Norman B. Barr Camp		300
1-234-01-1	Six Flags Great America - DE LE SE		100
1-235-01-1	Barn Dance - DE LE SE		40
1-236-01-1	Kane County Cougars - DE LE SE		43
1-236-01-2	Kane County Cougars: Accessible - DE LE SE		43
1-237-01-1	Grill 89 - DE LE SE		60
1-238-01-1	Chicago Fire - DE LE SE		60
1-238-01-2	Chicago Fire: Accessible - DE LE SE		60
1-239-01-1	Chuck's Southern Comforts Café - DE LE SE		55
1-240-01-1	FVSRA Bowling Tournament - DE LE SE		40
1-241-01-1	Sandwich Fair - DE LE SE		58
Total	\$		

*Event included in Social Club schedule.

Payment Type: Check Cash Money Order Credit Card
 Credit Card: MasterCard Visa Discover
 Cardholder Name _____
 Account Number _____ Exp. Date _____
 Authorized Signature _____

Office Use Only	
Date Rec'd	Cash Amt
Rec'd By	Check Amt
AIF Given	AIF Rec'd

registration form (ages 16+)

Registration Deadline: Monday, May 1 - 4:30 p.m.

Participant's Name _____ Age _____ Birth Date _____ Gender _____
Address _____ City _____ Zip _____
Are you a new participant? Yes No Is this a new address? Yes No Is this a new phone number? Yes No
Home Phone _____ Work Phone: Mom _____ Dad _____
Parents' Names _____ Cell Phone: Mom _____ Dad _____
Email Address _____
School _____ Teacher _____
Disabilities or Diagnoses _____
Are there any changes in allergic conditions? Yes No Dietary restrictions? Yes No Medication? Yes No
Other health issues? Yes No Please list _____
Do you have an updated emergency contact? Yes No Name _____
Address _____ Phone Number _____
Indicate friends and/or carpool accommodations _____

WAIVER AND RELEASE

IMPORTANT INFORMATION

SEASPAR is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. SEASPAR 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 activities must recognize that there is an inherent risk of injury when choosing to participate in recreational activities.

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

Recreational activities are intended to challenge and engage the physical, mental, and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning, and equipment, there is still a risk of serious injury when participating in any recreational activity. All hazards and dangers cannot be foreseen. Depending on the particular activity, certain risks, dangers, and injuries may exist due to inclement weather, slips and falls, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and other risks inherent to the particular activity. In this regard, it is impossible for SEASPAR 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 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 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 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 activity against SEASPAR, including its officials, agents, volunteers and employees.

I understand that SEASPAR carries no medical insurance and the participant's family must cover any medical costs incurred. In the event of an emergency, I understand and authorize SEASPAR staff and officials to secure from any licensed hospital, physician, and/or medical personnel any treatment deemed necessary for immediate care for myself or minor child and agree that I will be responsible for payment of any and all medical services rendered.

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 on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Parent's Signature _____ Date _____
Participant's Signature (18 or older or Parent/Guardian) _____ Date _____

**PARTICIPATION WILL BE DENIED if the waiver is not signed and dated by parent/guardian.
PARTICIPATION WILL BE DENIED if a current Annual Information Form is not on file.**

Submit registration form with payment to SEASPAR, 4500 Belmont Road, Downers Grove, IL 60515.

The registration deadline is 4:30 p.m. on May 1. Registration confirmations will be sent two weeks before programs begin.