

**RParks &
Recreation**
JEFFERSON COUNTY

636-797-5334

Jujitsu – High Ridge Civic Center - _____ 2019

PARENT/GUARDIAN NAME

PARENT'S DOB

ADDRESS

CITY

ZIP

PHONE

EMAIL

\$40 PER MONTH-PAID BY: CASH OR CHECK # _____

PARTICIPANT'S NAME

DATE OF BIRTH

AGE

GENDER

REFUND POLICY

Refunds for any program sponsored by the Jefferson County Parks and Recreation Department will be given only if the request is received in writing 24 hours prior to the beginning of the program.

Refunds will not be given after the program starts.

LIABILITY WAIVER

Photograph and General Release

I, the undersigned, hereby consent to and grant the County of Jefferson, Missouri permission to use, re-use, publish and/or re-publish my/my minor child's photograph in whole or in part, individually or in conjunction with other photographs or images, in any medium and for any purpose whatsoever, including but not limited to illustration, promotion, advertising, trade, electronic distribution and posting on the World Wide Web. I further consent to and grant permission to use my name and/or child's name in connection therewith. I grant this permission without limitations, reservation or any compensation whatsoever.

I, the undersigned, intending to be legally bound, do release and forever discharge the County of Jefferson, Missouri, its departments, boards, commissions, office holders, servants, agents, employees, successors, assigns, and all other persons on its behalf liable from all claims, demands, damages, judgments, actions, causes of action or injury, arising or which may arise from the use, re-use, publication of my minor child, or as a result of my being a participant in any Jefferson County Parks and Recreation Department Program.

I, the undersigned, rely solely upon my own judgment without influence by anyone in making this release and I fully understand and agree that it fully discharges all claims and damages whatsoever, known or unknown, and whether specially mentioned or not.

I HAVE READ THE ABOVE AND FULLY UNDERSTAND ITS PROVISIONS.

Parent or Guardian's signature REQUIRED if participant is 17 years of age or younger

Participant Signature (or Parent or Guardian)

Date