



Registration Form

Participant's Name: _____ D.O.B. (mm/dd/yyyy): _____

Parent/Guardian's Name: _____

Address: _____ City/State/Zip: _____

Session (please circle): I II Both

Class: _____

Please indicate if it is a YOUTH or PRESCHOOL level

Please Read and sign

Liability Waiver: The undersigned ("participant"), by tendering this application, agrees to abide by all the rules and regulations of the YMCA now in effect or to become effective in the future. Copies of such rules shall be posted within the facility, in a conspicuous location. Inappropriate behavior by a participant or by a participant's guest may result in suspension or termination of that participant's program registration for any reason whatsoever. In addition YMCA may refuse for any reason the renewal of any participant's program registration.

It is expressly agreed that the use of the Greater Lowell Family YMCA's facilities and premises (including but not limited to parking areas, walkways etc.) shall be undertaken by the participant at his or her sole risk and The Greater Lowell Family YMCA shall not be responsible or liable for loss or damage to any other property of participants or their guests, including but not limited to their automobiles and contents. It is also agreed that damages to the YMCA facilities or properties, or to the properties of any participant by another participant or their guest, is the sole responsibility of the offending participant.

The Greater Lowell Family YMCA reserves the right to close the facility on specific holidays (to be posted) as well as portions of the facility for maintenance and/or renovation.

First Name Middle Initial Last Signature of Responsible Party

Date _____