

Dimple Dell Fitness & Recreation Center

Arts & Games in the Park

WHO: Boys and Girls, ages 5 - 10 years old
WHAT: An organized program full of activities. Upcoming weekly themes include: Camping, Animals, Space and more!!

WHEN: Week of June 12 to August 8, 2017
(No program July 4, 2017 & July 24, 2017)
Monday/Wednesday or Tuesday/Thursday

TIME: 10:00 a.m.- 12:00 p.m.

WHERE: Big Bear Park
9695 South (Onyx Lane) 930 East
White City Township, UT

Granite Park
2725 East Grouse Creek Circle (10000 South)
Sandy, UT

South Mountain Park
14300 South (Vestry Road) 657 East
Draper, UT

COST: \$65.00 per person for the full 8 weeks
OR
Daily option (must register each time): \$4.00 per day
*Please take your receipt, to the location, when purchasing the daily option.

A schedule of daily activities, for the Summer, will be handed out the first day of the program.



No refunds or credit for missed sessions.

Fridays may be used as additional make-up days due to inclement weather.

Register at Dimple Dell Fitness & Recreation Center
385-468-3355 (10670 South 1000 East) or
online @ www.slco.org/dimple-dell
Questions or concerns, please contact Lesley:
lashaw@slco.org or 385-468-3355



Arts & Games in the Park Registration Form

10 :00 a.m. - 12:00 p.m.

Session/Grade Information:

- _____ **Big Bear Park (Mon/Wed 7-10 year old)**
- _____ **Big Bear Park (Mon/Wed 5-6 year old)**
- _____ **Granite Park (Mon/Wed 7-10 year old)**
- _____ **Granite Park (Mon/Wed 5-6 year old)**
- _____ **South Mountain (Tue/Thur 7-10 year old)**
- _____ **South Mountain (Tue/Thur 5-6 year old)**



_____ **Please check here if this is the daily option**
Daily Option Location: _____



Check here to be contacted about inclusion opportunities for people with disabilities.

Name of Participant _____ DOB _____ Age _____ Girl Boy
 Address _____ City _____ State _____ Zip _____
 School Attending _____ Grade _____
 Parent or Guardian _____ Home Phone _____ Cell Phone _____
 Email Address _____
 Emergency Contact (other than guardian) _____ Phone _____
 Are there any injuries or conditions that our staff should be aware of? Yes No
 If yes, please explain _____

Parental Statement of Agreement – Assumption of Risk, Liability Release and Refund Policy

Assumption of Risk: I hereby acknowledge and agree that my child's participation in recreational activities involves inherent foreseeable and unforeseeable risks and hazards which may expose my child, or me, to illness, injury, or death. In consideration of my child's participation in such activities, I for myself, my child, my heirs, my executors and administrators, freely and voluntarily agree to assume and accept any and all risks to my child or myself associated with my child's participation in Salt Lake County recreational activities.

Release: In consideration of my child's participation in the Salt Lake County recreational activities, I, for myself, my child, my heirs, my executors and administrators hereby release Salt Lake County and its officers, agents, and employees from any cause of action, claim, or demand of any nature whatsoever I or my child may now have, or have in the future, against Salt Lake County on account of personal injury, property damage, death, or accident of any kind, caused by, arising out of, or in any way related to my child's participation in Salt Lake County recreational activities.

Indemnification: In consideration of my child's participation in the Salt Lake County recreational activities, I agree to indemnify and hold harmless County, its officers, agents, and employees from any and all causes of action, claims, demands, losses, or costs of any nature whatever cause by, arising out of, or in any way related to my child's participation in the Salt Lake County recreational activities. I agree that my duty to defend and indemnify the County under this Agreement includes all attorney fees, litigation and court costs, expert witness fees, and any sums expended by or assessed against the County for the defense of any claim or to satisfy any settlement, arbitration award, or verdict paid or incurred on behalf of the County arising out of or in any way related to my child's participation in the Salt Lake County recreational activities.

Refund: Refunds may only be requested in person and must be accompanied by a written request. As per Salt Lake County policy and procedures the Parks and Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. No refunds shall be given after the first day of the program.

Collections: I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred for collection. I understand that any account delinquent 30 days or more will be turned over to collection.

Emergency Treatment: I hereby authorize Salt Lake Parks and Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise there from.

Media Consent: I hear by grant permission to Salt Lake County to use my or my children's photograph, videotaped image, quotes/comments, or name for publicity and educational purposes in any and all publications and media without limit or compensation.

Name Posting: Unless otherwise indicated below, Salt Lake County is authorized to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website.

I do not authorize Salt Lake County to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website.

By signing this assumption of risk, liability release, and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosure, and that I agree to its terms. If any portion of this Agreement is held to be invalid by a court of law, then it is agreed and intended that all the remainder shall, notwithstanding, continue in full force and effect.

Signature (Parent or Legal Guardian): _____ Date _____

OFFICE USE ONLY. . . Receipt No.	Amt.	Date	By
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