

## 5 Ways to Register

### 1 In Person:

At the appropriate facility



### 2 By Phone:

Heritage Center . . . . .630-627-6100  
Fitness Center . . . . .630-574-0420  
Nature Center . . . . .630-941-8747



### 3 By Fax:

Heritage Center . . . . .630-627-6180  
Fitness Center . . . . .630-574-0430  
Nature Center . . . . .630-941-3558



### 4 By Mail:

To the appropriate facility



### 5 Online:

Visit us online at  
[www.obtpd.org](http://www.obtpd.org)



**Resident  
Registration  
Begins December 5**

**Open Registration  
Begins December 12**

[www.obtpd.org](http://www.obtpd.org)

## Registration Guidelines

1. Registration for residents of Oakbrook Terrace Park District, will begin on **Dec. 5, 2011**. Open registration will begin on **Dec. 12, 2011**.
2. Resident mail-in registration will be accepted beginning **Dec. 5, 2011**. To mail in your registration, please use the registration form on the next page. To confirm enrollment, contact the appropriate facility. Mail-in registration for non-residents will begin **Dec. 12, 2011**.
3. Resident walk-in, call-in, and fax-in registration starts **Dec. 5, 2011** during regular office hours. Open registrations will be accepted beginning **Dec. 12, 2011**.
4. All registrations are accepted on a first-come, first-serve basis.
5. Payment must accompany registration.
6. There is a non-resident fee of \$5 per participant per class for those not living within Park District boundaries, unless otherwise noted. (For example: \$10/\$15)
7. Activities are held at the Fitness Center, Nature Center, and Heritage Center.  
Please check to see which location the class is being held. Not all programs are held at our sites.
8. There is a \$25 administration fee for returned checks. These fees must be paid in cash to the Business Manager.

## Refund Policy

1. If a class minimum is not met, the class will be cancelled and registration fees will be returned.
2. No refunds will be given 2 business days before a class is scheduled to start unless a physician's excuse is presented.
3. No refunds will be made after a ticket for a trip, stage show or special event has been purchased.
4. Refunds given prior to the start of a program will be charged a \$5 service fee. Please allow 2 weeks to process refunds.

## Deadline to Register

A \$10 late fee per person will be added to the fee after the deadline to register.

# Registration Form



**OAKBROOK TERRACE**  
PARK DISTRICT

**Mail to: Heritage Center**  
1 S 325 Ardmore Ave  
Oakbrook Terrace, IL 60181

**Mail to: Fitness Center**  
1 Parkview Plaza  
Oakbrook Terrace, IL 60181

**Mail to: Lake View Nature Center**  
17 W 063 Hodges Road  
Oakbrook Terrace, IL 60181

**FAX to: 630-627-6180**

**FAX to: 630-574-0430**

**FAX to: 630-941-3558**

**Payor Last Name:** \_\_\_\_\_

**Payor First Name:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Alternate #:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

Name of Participant	Birth Date	Program	Program #	Day/Dates	Time	Fee
						\$
						\$
						\$

**How did you hear about the program?**

- Newspaper  
  Radio  
  Television  
  Catalog  
 Flyer  
  Other: \_\_\_\_\_

**After deadline late fee** (\$10 per person) . . . \$ \_\_\_\_\_  
 \$ \_\_\_\_\_

**Total fees enclosed** . . . . . \$ \_\_\_\_\_

**Special Needs**

If the participant has special needs, please let us know so that we can make arrangements to have those special needs met:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- Check  
 Cash  
 Credit Card (Visa or MasterCard only)  
      Visa **or**  MasterCard

<b>STAFF USE</b>
<b>Receipt #:</b> _____

Card # \_\_\_\_\_ Exp. Date \_\_\_\_ / \_\_\_\_

Signature \_\_\_\_\_

*If information is intentionally falsified, registration will be void.*

**No refunds will be made after a ticket for a trip or special event has been purchased.**

**WAIVER & RELEASE OF ALL CLAIMS**

Please read this form carefully and be aware that in signing up and participating in this program you will be waiving and releasing all claims for injuries you might sustain arising out of this program.

**ACKNOWLEDGEMENT OF RISK OF INJURY CLAUSE:** "As a participant in the program, I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries, including death, damages or loss which I may sustain as a result of participating in any and all activities connected with or associated with such program."

**WAIVER OF CLAIM FOR INJURY CLAUSE:** "I agree to waive and relinquish all claims I may have as a result of participating in the program against the Park District and its officers, agents, servants, and employees."

**RELEASE FROM LIABILITY CLAUSE:** "I do hereby release and discharge the Park District and its officers, agents, servants and employees from any and all claims from injuries, including death, damage or loss which I may have or which may accrue to me due to my participation in the program."

**INDEMNITY AND DEFENSE CLAUSE:** "I further agree to indemnify and hold harmless and defend the Park District and its officers, agents, servants and employees from any and all claims resulting from injuries, including death, damages and losses sustained by me and arising out of, connected with, or in any way associated with the activities of the program."

**PHOTO RELEASE:** I hereby authorize and give my consent to the Park District to photograph/video my child (or me), and without limitation, to use such photographs/video in connection with promoting/advertising the services, programs, and facilities of the Park District, without consideration of any kind, including, but not limited to, the Park District's website and Park District sponsored social media site(s).

**I have read and fully understand the above program details and waiver and release of all claims.**

**Date** \_\_\_\_\_

**Participant's Signature** (Signature of Parent/Guardian if participant is under 18 years of age)



**For more information call the Heritage Center: 630-627-6100**