

**CITY OF BOULDER CITY
PARKS AND RECREATION DEPARTMENT
900 ARIZONA STREET λ BOULDER CITY NV 89005
TELEPHONE (702)293-1780**

YOUTH CENTER INFORMATION SHEET

Child's Name _____ Birthdate _____ Age _____ Grade _____
Address _____ Phone # _____
Father/Guardian _____ Employment _____ Work Phone _____
Mother/Guardian _____ Employment _____ Work Phone _____
Person(s) to contact in emergency: _____ Phone # _____
_____ Phone # _____
Allergies or Special Problems: _____

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**Release of Liability
YOUTH CENTER PROGRAM -- APRIL 1, 20____ – MARCH 31, 20____**

I, the undersigned, as a participant or parent/guardian of the participant in the Youth Center Program sponsored by the Boulder City Parks and Recreation Department, do understand that, in consideration of the Parks and Recreation Department, I do release them, their officers, agents or employees from all liability demands or claims for loss, damage or injury resulting from participating in the Youth Center Program for any dates from April 1, 20__ through March 31, 20__.

I have been informed by the City and I fully understand and agree that no insurance coverage whatever is being provided by the City, its agents or representatives, undertaking to indemnify, or in any other manner, guaranteeing the safety of any participant in the Youth Center Program as to any injury or other peril or contingency, resulting from participating in the Youth Center Program, whether to persons or property. I recognize and understand that the Youth Center Program requires that the participant be in good health. I warrant and declare that the participant is in good health. If the participant is a minor, I also give my consent for his/her participation in the Youth Center Program, and for any necessary emergency medical treatment.

I understand that the Youth Center Program operates from 2:00 p.m. to 6:00 p.m., Monday – Thursday, and 2:00 p.m. to 8:00 p.m. on Friday. Adult supervision will be offered during these hours only. **TIMES ARE SUBJECT TO CHANGE.**

I have read the Youth Center entrance requirements and agree to follow all rules and procedures of the Youth Center Program. I have gone over these rules and regulations with my child.

SIGNATURE OF PARENT OR LEGAL GUARDIAN

DATE