

City of Poquoson Parks & Recreation Programs

Registration Form

Please remember that an accurate, complete, and legible registration form is vital for us to contact you.

Participant Name:	Male or Female
Address:	
City:	State:
Participant Date of Birth:	Age Today:
Parent/Guardian Name:	
Email Address: (Required)	
Primary Phone Contact:	Alternate Phone Contact:

Program #	Activity Title/Session	Fee

Credit Cards Accepted

MasterCard and Visa

Name as it Appears on Card _____

Signature: _____ Expiration: _____

Card # _____ - _____ - _____ - _____ Ein: _____
(on back of card)

PLEASE READ WAIVER AND SIGN BELOW on Page 2, a signed waiver

must accompany each registration

A parent/guardian must sign for their children ages 17 and under.

I have had explained to me the nature of the activity in which I am or my child is being enrolled.

I understand that there are certain risks associated with this activity & that it is the duty of each participant to exercise reasonable care for his own safety and that of other participants.

If this consent is given for my child, I also understand that, while participating in the activity, my child will be expected to behave in a reasonable and responsible manner and that the activity's supervisory staff have the authority to discipline my child in a manner similar to that imposed in Poquoson City's public schools.

While it has been explained to me that the City of Poquoson prides itself upon the competency and dedication of its staff, I understand that, under Virginia law, both the City of Poquoson and its employees, its officers, and agents are immune from liability for negligence should I or my child suffer any injury while participating in the activity and that I may consider procuring insurance to protect myself or my child from such occurrences. With all of this in mind, I hereby give my consent to enroll me or my child in the activity listed above, specifically agreeing and consenting to the following where applicable:

- (1). I agree to allow photographic images of myself (my child) to be taken and utilized for promotional purposes by the City of Poquoson
- (2). I agree to allow myself or my child to be transported from the publicly advertised pick-up site to participate in the activity(s) listed above at the site identified in the activity information should it be required as described in the program.
- (3). I will be responsible for the payment of fees imposed by the City for the activity(s) I am registering.
- (4). I agree that I will and my child will behave in a sportsmanlike manner, and will not harass, or behave in a negative manner towards any coaches, children, referees or those in attendance at any Parks and Recreation Activity that I or my child may be attending or participating in at any time. And, I further understand I can be removed for such occurrence at the discretion of PPR officials, to include myself, my child or those in attendance related to my child's attendance at any time for said behavior.
- (5) I agree for my phone, address, and email information to be provided to coaches and/or instructors as necessary as related to the program I am registering.
- (6) I have read the Refund Policies of the Department and understand they are available for review at the Parks and Recreation Website, and at the PPR Office.

Credit Card Convenience Fee + 2.5% _____

Special Needs or Accommodations:

Make checks payable to
Poquoson Parks & Recreation and
mail or register at
Poquoson Parks & Recreation
830 Poquoson Avenue
Poquoson, VA 23662

The City of Poquoson has created new protocols and put in place preventative measures to reduce the spread of COVID-19; however, our City cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending any program may increase your child(ren)s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to, or infected by COVID-19 by attending City of Poquoson Community Recreation programs, activities, or events, and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, other program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself including, but not limited to, personal injury, disability, and death, illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)s attendance at City of Poquoson Community Recreation program. On my behalf, and on behalf of my child(ren)s, I hereby release, covenant not to sue, discharge, and hold harmless City of Poquoson, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of City of Poquoson, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any City of Poquoson program.

As a participant in the Parks and Recreation , and as a parent of a program participant our family and participant(s) will follow the protocols for entry, screening and other safety measures as part of the mandated safety practices for this program. I also agree to not send my child to camp when he or she is sick, and I agree to notify Community Recreation should there be a possible disease exposure situation in an effort to protect other from the spread of communicable diseases.

Signature of Parent/Guardian

Date