Walk in/Mail in Class Registration Form

Save time, register online at no additional cost. *www.hbsands.org*

PAYEE

*Name (Print)		*Billing Address	
*Address		*e-mail	
*City	*Zip Code	Work Phone ( )	*Home Phone ( )

*Required fields. Email address will only be used for City of Huntington Beach information.

PARTICIPANT

CG City Gym & Pool
MCC Murdy Community Center
ECC Edison Community Center
RSC Rodgers Senior Center
HBAC Huntington Beach Art Center
CS Community Services Classes

Location/Activity # please include location abbreviation as shown above	Activity Name	Day	Time	Participant Name	Birth Date	Sex	Fee
RSC/4386 201	Family Martial Arts	Tu	5-6 pm	Joe Surfer	Jan 1, 1984	M	$75
____/_____.____							
____/_____.____							
____/_____.____							
____/_____.____							
						Total of Activity Fees $	

SAMPLE LINE

Swimming Only! 2nd Choice Class # __ __ __ __. __ __ __ 3rd Choice Class # __ __ __ __. __ __ __

Youth Sports Only! ☐ Grades 7-8 ☐ Grades 5-6 ☐ Grades 3-4 ☐ Grades 1-2 ☐ Pee Wee

The above named participant has my permission to participate in the activity indicated above. I realize every precaution is taken to eliminate any injuries or hazards and a competent supervisor is present; however, in the event of an injury, I hereby waive, release and hold harmless from any liability for damages or claims for damages for personal injury, including accidental death, as well as from claims for property damage which may arise in connection with the above named activity, against the Supervisor, Community Services Department personnel and the City of Huntington Beach. Registration constitutes permission for the City of Huntington Beach to take and use any photograph of the above named participant and/or legal guardian in any promotional materials without compensation to the above named participant and/or legal guardian of the above named participant for such use.

DATE: _____ SIGNED: _____
Participant/Parent or Legal Guardian

PAYMENT

☐ Cash (walk-in only) ☐ Check # _____ RECEIPT # _____

_____

☐ Credit Card _____

☐ Visa
☐ Mastercard Expiration Date _____ Card Holder Signature: _____
☐ Discover

HAVE YOU ENCLOSED YOUR CHECK OR CREDIT CARD INFORMATION AND A STAMPED, SELF-ADDRESSED ENVELOPE?
ONE CHECK REQUIRED FOR EACH CLASS Only one envelope required.

MAIL TO: City of Huntington Beach, Community Services Department
2000 Main St. PO Box 190, Huntington Beach, CA 92648-0190