



City Of Compton Recreation Department

Senior Citizen Registration Application





City Of Compton Recreation Department

EMERGENCY INFORMATION

The requested information is important for your health and welfare while utilizing a City of Compton Recreation facility. Please make sure this information is correct and current.

Applicant's Name: _____

Emergency Contact: _____ Phone: _____ Relation: _____

Emergency Contact: _____ Phone: _____ Relation: _____

Medical Information

Do you have any medical conditions that may prevent you from fully participating in recreational activities? Yes _____ No _____

If yes, please list:

Medications:

Insurance Provider Information:

Additional Information: _____

Authorization for Consent to Treatment

I HEREBY GIVE CONSENT TO THE CITY OF COMPTON'S REPRESENTATIVE TO PROVIDE ALL EMERGENCY MEDICAL OR DENTAL CARE PRESCRIBED BY A DULY LICENSED PHYSICIAN (M.D.), OSTEOPATH (D.O.) OR DENTIST (D.D.S.). THIS CARE MAY BE GIVEN UNDER WHATEVER CONDITIONS ARE NECESSARY TO PRESERVE MY LIFE, LIMB OR WELL-BEING.

Participant's Name (Print): _____

Participant's Signature: _____ Date: _____



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RELEASE OF LIABILITY

The City of Compton has developed Guidelines that align with the LA County Health Department's COVID-19 policy and procedures. With the guidelines being followed, participants may still be susceptible to the COVID-19 virus and its various strands.

Name _____
Last First Middle Initial

Address: _____

City: _____ Zip: _____

Phone #: _____ Birth Date: _____

Please read and sign:

I, _____, release and forever discharge and hold harmless the City of Compton, the Recreation Department, and its agents, officers, and staff, from and against any and all liability demands or claims for losses or damages, and against any judgment that may be recovered in any such action against them resulting from or in any manner arising out of any injury, sickness, or damage which may be sustained by the participant in the activity, or in the act of transporting.

Signature

Date



City Of Compton Recreation Department

Terms and Agreement

Upon the completion of registering for a City of Compton Recreational activity, program, or assistance in transportation, the participant agrees and/or acknowledges the following:

- 1) Programs and Activities will be organized and implemented in accordance to the CDC guidelines and the City of Compton's preferred practice.
- 2) Participants are to follow the guidelines, even if you are fully vaccinated.
- 3) Participants will be subjected to designated areas, due to preferred practice. Participants are to remain in the designated areas.
- 4) Programs and Activities can be cancelled at any time, without prior notice, due to the awareness of a COVID-19 outbreak.
- 5) Participants will be scanned for a temperature check.
- 6) Masks are to be worn at all times.
- 7) Social Distancing of 6 feet will be encouraged while engaging in activities and social time, even if you are fully vaccinated.
- 8) All participants must be **pre-registered** to engage in activities
- 9) Programs and Activities are limited in space and will be filled on a first come, first served basis. A waiting list will be established in the event that the registration is full. If you need to cancel, please contact us by 5:00 pm on the previous work day.

Print Name

Signature

Date



City Of Compton Recreation Department

General Information

Douglas F. Dollarhide Center

301 N. Tamarind Ave

Compton CA 90220

Phone: (310) 605-5688

Email: contactparks@cityofcompton.org

Transportation

Please contact (310) 605-6224 for questions regarding transportation.

How to register

Print the registration application from the link on the City of Compton's website (www.comptoncity.org), or pick-up an application at the Douglas F. Dollarhide Community Center. Fill out and return the application to the Recreation staff at the Douglas F. Dollarhide Community Center.

How to make a reservation for senior activities

General reservations for activities may occur up to 24 hours in advance of the day of the activity. Some activities, such as field trips, may require an earlier reservation. Contact staff via phone to make reservations for activities. Reservation slots are limited during Covid-19.



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MEDIA RELEASE FORM

I, _____, grant permission to the City of Compton and its representatives, hereinafter known as the "Media" to use my image (photographs and/or video) for use in Media publications including:

- Videos
- Email Blasts
- Recruiting Brochures
- Newsletters
- Magazines
- General Publications
- Website and/or Affiliates
- Other: _____

I hereby waive any right to inspect or approve the finished photographs or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the image. Please initial the paragraph below which is applicable to your present situation:

_____ I am 21 years of age or older and I am competent to contract in my own name. I have read this release before signing below, and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

_____ I am the parent or legal guardian of the below named child. I have read this release before signing below, and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

Name (please print): _____

Signature: _____ Date: _____

Signature of parent or legal guardian: _____ Date: _____
(For a minor/child)