

Canyon Lake P.O.A. Recreation Department

ACTIVITY REGISTRATION FORM

(Please Print & Fill Out completely)

Name (Last) _____ (First) _____ (MI) _____

(Adult/Parent/Guardian)

Address _____

(Street)

(City)

(State/Zip)

Phone Numbers: () _____ () _____ () _____

(Day)

(Night)

(Emergency)

ACTIVITY	PARTICIPANTS NAME	AGE	LEVEL	TIME	SESSION	STARTING DATE	2 WEEK	3 WEEK

**LIABILITY
WAIVER:**

I understand that the CLPOA does not carry insurance to cover participants or spectators of CLPOA sponsored activities. I hereby assume the risk of my injuries that may be sustained in the pursuit of the CLPOA Activity and forever discharge the CLPOA and its officers, agents, and employees from any actions, suits, damages, claims for judgments that may result from any property damage or personal injuries that I may sustain while using equipment owned or in possession of the CLPOA activities while engaged in sponsored activities. I also agree to indemnify, defend and hold harmless the CLPOA, its officers, agents and employees from any and all loss, damages, liability, cost or expense, arising out of any acts or omissions of the CLPOA, its officers, agents and employees.

Adult/Parent/Guardian Signature: _____ Date: _____

Form of Payment () Cash () Check

Total Fees \$ _____ Amount Enclosed \$ _____ Track & Lot _____

Make Check(s) or money order payable to: CLPOA Recreation Department.
31512 Railroad Canyon Rd. Canyon Lake, CA 92587 (951) 244-6841 Ext. 610