



Parent's Names: _____
Phone: (H) _____ (W) _____ (C) _____
Address: _____ City: _____ Zip: _____
E-Mail Addresses: _____
Emergency Contact: _____ Emergency Phone: _____

1st Child's Name: _____ DOB:(mm/dd/yy) _____ / _____ / _____
Class Title _____ Class Tuition _____
Class #1: _____ \$ _____
Class #2: _____ \$ _____
Class #3: _____ \$ _____
Monthly Tuition: \$ _____ *Discount: \$ _____ Total: \$ _____

2nd Child's Name: _____ DOB:(mm/dd/yy) _____ / _____ / _____
Class Title _____ Class Tuition _____
Class #1: _____ \$ _____
Class #2: _____ \$ _____
Class #3: _____ \$ _____
Monthly Tuition: \$ _____ *Discount: \$ _____ Total: \$ _____

***Multi Class Discount: 2 Classes/Week/Family = \$10 off 3 Classes/Week/Family = \$20 off**

WAIVER STATEMENT

The undersigned states that he/she understands that the Kingman Recreation Commission (KRC) is not and shall not be responsible for or liable for any illness, injury to person or damage to property resulting from the program in which the undersigned is enrolling or from his/her participating in said program and the undersigned hereby forever releases and holds harmless the said (KRC) from any and all claims of any kind that the undersigned or his/her heirs, executors, administrators or assigns may have or claim to have resulting in any way from his/her participation in said program. *ALL KRC ACTIVITIES ARE SUBJECT TO CHANGE DUE TO COVID 19.

I have read, understand the waiver statement, and given permission for participants named above to participate in the Kingman Recreation Commission program stated above.

Signature(s) of: Legal Guardian (Mandatory): _____ Date: _____

Printed Names: _____

KRC & KDC reserves the right to take photos/videos of all programs and participants and use them for advertisement/promotion. If you have any concerns please contact the Director personally.

Email: knrec.office@gmail.com, KRC Website: www.knrec.org