



**Advance Registration Preference for Bellevue Residents • Registration Begins November 12, 2019**

For more information please call 425-452-6885 • FAX: 425-452-2910

See *Registration Steps* Page 7.

Mail completed form to: Bellevue Parks Registration; PO Box 90012; Bellevue, WA 98009-9012

Make checks payable to **City of Bellevue**

Please print clearly

* Main Contact Last Name		* First Name	
* Mailing Address		* E-mail Address	
* City	* State	* ZIP Code	
Main contact date of birth		( ) Home phone	( ) Work phone
		* ( ) Cell phone	

I do not wish to receive updates from Bellevue Parks & Community Services via email.  
NOTE: If you check this box, you will not be notified of future registration opportunities by email.

* Participant's Name	Use Scholarship?*	* Date of Birth	M/F	Class Number	* Class Title	Fee	Alternate Class No.
	<input type="checkbox"/>					\$	
	<input type="checkbox"/>					\$	
	<input type="checkbox"/>					\$	
	<input type="checkbox"/>					\$	

Donation \$ \_\_\_\_\_ Designated area: \_\_\_\_\_ (we will contact you for clarification if needed)

People with disabilities are encouraged to participate in any program of their choice. The city will provide reasonable modifications for programs and services. Call Highland Community Center, 425-452-7686, for more information.



\*For scholarship information, call 425-452-6885, or see page 9.  
*Scholarship applications must be approved prior to registration.*

**Payment Details** Payment due in full at time of registration

**Payment Method**

Check     D.D.A. (send to Highland)

Credit Card    Total Fee: \$ \_\_\_\_\_

**Card Number** \_\_\_\_\_

**Expiration Date** \_\_\_\_\_

**Non-resident registrations are not accepted prior to the first day of non-resident registration.** Registrations received from non-Bellevue residents will be accepted beginning November 21, 2019.

Mail completed form to:  
Bellevue Parks Registration; P.O. Box 90012; Bellevue, WA 98009-9012

**WAIVER OF LIABILITY/RELEASE – PLEASE READ CAREFULLY**

In consideration of myself and/or my child(ren) being allowed to use City of Bellevue Parks & Community Services facilities and/or participate in the City-sponsored activity(ies) identified herein, **I ASSUME ANY AND ALL RISKS, INCLUDING RISK OF INJURY OR DEATH**, associated with my or my child(ren)'s use of said facilities and/or participation in said activities. I further agree on behalf of myself, my heirs, executors, assigns, and personal representatives, to waive and **RELEASE** any and all rights and claims for damages, including attorney fees, I now, or may hereafter have, whether known or unknown, against the City of Bellevue and its officials, employees, and agents for any injuries suffered by me or my child(ren) in connection with the use of City facilities or participation in the City-sponsored activity(ies) identified herein. I acknowledge that I have carefully read this **WAIVER OF LIABILITY** and fully understand that I am waiving any right that I may have to bring a legal action or to assert a claim against the City of Bellevue in connection with the use of City facilities or participation in the City-sponsored activity stated below.

**PHOTO/VIDEO RELEASE:** I give my permission to have photos and/or video and audio recordings taken of me or my child(ren) during City of Bellevue activities and authorize the City of Bellevue to copyright, use, and publish the same. I understand I am waiving any right of privacy, compensation, copyright or other ownership right connected to the photo or recording. If you do not give permission to have photos and/or video and audio taken of you or your child(ren), please contact the main office at 425-452-6885 or Parksweb@bellevuewa.gov.

**I acknowledge that I have carefully read this WAIVER OF LIABILITY / RELEASE and fully understand that I am waiving any right that I may now or hereafter have to bring a legal action to assert any claim against the City of Bellevue in connection with my or my child(ren)'s participation in this activity.**

\* Printed Name: \_\_\_\_\_  
*Registration NOT VALID without signed waiver.*

\* Adult Participant or Participant's Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_