

## Watersports (6th-8th Grade)

Redwood City Parks, Recreation & Community Services | www.teamsideline.com/redwoodcity

PLEASE COMPLETE AND RETURN TO RED MORTON COMMUNITY CENTER - 1120 ROOSEVELT AVE, REDWOOD CITY REGISTRATION DEADLINE: Thursday, September 4, 2025. | CONTACT: Mike Smith 780.7254 msmith@redwoodcity.org

BAIR ISLAND AQUATIC CENTER

**REGISTRATION FEE: \$130** 

Name on Card (print)

INFORMATION: Program runs 9/9-10/9/25, Tuesdays and Thursdays, from 4:15pm-6:15pm at

BIAC (1450 Maple Street). Come enjoy the waters of the Bair Island wetlands from a solo boat. This after school program is a great way for middle schoolers to be outside in a safe way while learning a new sport. If you are tired of looking at a screen, come try a kayak or stand up paddle board. Learn a new sport (or improve your skills)

while learning how to read the water, wind and tide and how to safely boat and navigate our local waters.

REFUND POLICY: If a class is cancelled by the department, a full refund will be issued. Class cancellations made one (1) week prior to the class start date will receive a refund less a \$5 cancellation fee. Participants who wish to withdraw from a class less than one (1) week prior to the start date will receive a department credit which may be applied to any future recreation department activity, less

the \$5 cancellation fee. In general, no refunds or co	edits will be issu	ued after th	ne class begins.			
ACTIVITY REGISTRATION						
PARTICIPANT'S NAME First & Last	BIRTHDATE (mm/dd/yy)	GRADE	SCHOOL	GENDER (circle)	PROGRAM #	FEE
				M/F/NB/O	46.410	\$130
Permission to walk home alone? If yes, check the	box.	•		Total	Fees \$	
	1,	wish to don	ate to the Youth	Scholarship F	und + \$	
			Less		ount - \$	
					OTAL \$	
PRIMARY CONTACT (Adult)				E ENTIRE FO	RM	
Name		_ Birthdate	e/	Gender — (Circle one)	M F Non Binar	y Other
Street Address					Charle have to me	
CityZip	Ema	il Address_			Check box to re promotional er	mails
Primary Phone ()Second	ary Phone ()		Ce	ll Phone (	)	
Cell Phone Carrier (if you wish to receive important to	ext alerts- ATT, Ve	rizon, etc.)	·	_Emergency C	ontact	<del></del>
Relationship to participantEmergen	cy Daytime Ph:(_	)	Emerge	ency Evening P	Ph:()	
LIABILITY WAIVER & PHOTO RELEASE (Ac	lult)					
LIABILITY WAIVER (all classes require the signature of in the following programs, including associated travel spis given for me and/or child as named below. In consider the City of Redwood City, its agents, its employees and varising from or connected with these programs. I assume of my child's and/or my participation in the program. To responsible for ensuring my child's and/or my environment Teams, etc.) is done at our own risk. I sign of my own free PHOTO RELEASE: I/we agree to allow use of my/our photon.	ponsored by the C ration of participa olunteers working e all risk for any in the extent I and/ou ti is safe/free from e will. Sign Below	ity of Redwo tion in these for the City juries, inclu my child ar obstruction	ood City Parks, Re e programs, I here , from any and all ding the risk of ex e participants of v ss and that any use	ecreation & Corection & Corect	mmunity Services L and hold harmless of arry suffered by me municable diseases on classes, I acknow applications (Zoon	Department and release or my child s as a result wledge I am n, Microsoft
Waiver Signature	Photo Release Ini	tial				
Print Name	Date					
PAYMENT VISAT MasterCard AMERICAN DISCOVER DECRRESS						
CREDIT CARD				I	СНЕСК	
	xp. Date		curity Code or 4 digit #)	Pay	<b>⊿</b> ⁄able to: CITY OF F	RWC
Signature X				- I	returned check fe	<u>e</u>

## AQUATIC ACTIVITY RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("AGREEMENT")

IN CONSIDERATION of being given the opportunity to participate in any way in any **BA1R ISLAND AQUATIC CENTER** ('Club") activities ("Activity") I, for myself, my personal representatives, assigns, heirs, and next of kin:

- 1. ACKNOWLEDGE, agree, and represent that I understand the nature of Rowing and Paddling Activities, both on water and land based, and that I am qualified, in goad health, and in proper physical condition to participate in such Activity;
- 2. FULLY UNDERSTAND that: (a) ROWING AND PADDLING ACTIVITIES INVOLVE RISKS AND DANGERS of serious bodily injury, including permanent disability, paralysis, and death ("Risks"); (b) These Risks and dangers may be caused by my own actions, or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the Releasees named below; and (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the Activity;
- 3. AGREE AND WARRANT that I will examine and inspect each Activity in which I take part as a member of the Club and that, if I observe any condition which I consider to be unacceptably hazardous or dangerous, I will notify the proper authority in charge of the Activity and will refuse to take part in the Activity until the condition has been corrected to my satisfaction.
- 4. HEREBY RELEASE, discharge, and covenant not to sue USRowing, the Club, their administrators, directors, agents, officers, members, volunteers, and employees, other participants, regatta organizers, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the Releasees herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations; and I further agree that if, despite this release and waiver of liability, assumption of risk, and indemnity agreement, I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I have read this Agreement, Fully understand its terms, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and affect.

ADDRESS			
PHONE	DATE		
		for today's visit	
PARTICIPANTS SIGNATURE	(age 18 or over)		
	PARENTAL CONSENT		
AND I, the minor's parent and/or experience and capabilities and be covenant not to sue, and AGREE liability, claims, demands, losses, negligence of the releases as or ot I, the minor, or anyone on the min AND HOLD HARMLESS each of may incur as the result of any such	legal guardian, understand the nature of ro lieve the minor to be qualified to participa FO INDEMNIFY AND SAVE AND HOL or damages on the minor's account caused nerwise. including negligent rescue operatior's behalf makes a claim against any of the Releasees from any litigation expense a claim.	twing and paddling activities and the minor's te in such activity. I hereby release, discharge, LD HARMLESS each of the Releasees from all or alleged to be caused in whole or in part by the ions, and further agree that If, despite this release he above releasees, I WILL INDEMNIFY, SAV es, attorney fees, loss liability, damage, or cost a	ie e, E, ny
PRINTED NAME OF PARENT/O	GUARDIAN		_
ADDRESS if different			
PHONE (home)	(cell)	DATE	
EMAIL ADDRESS			
PARENT/CHARDIAN SICNAT			

(only if participant is under the age of 18)

PRINTED NAME OF PARTICIPANT