

Art & Games In the Park



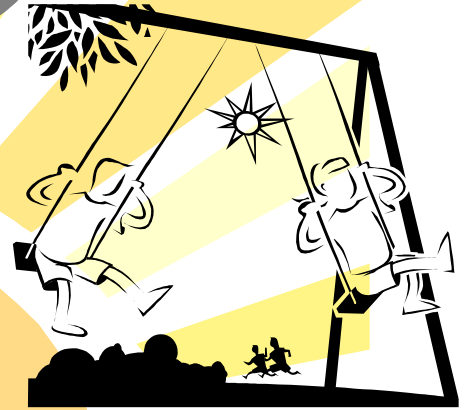
What: An organized program full of activities including: art projects, crafts, and outdoor games!

Who: Boys & Girls ages 5-10
Children will be under the supervision of the Copperview Staff. 1 staff to 10 children

Where: Copperview, Union or Midvale Park depending on day!

Cost: \$18 for 6 fun filled days in the park

When: 10 AM-12 Noon



Monday's

Copperview Park (8446 S. Harrison St.)
Program runs June 8-July 13

Wednesday's

Union Park (7360 South 700 East)
Program runs June 10-July 15

Thursday's

Midvale Park (425 W. 6th Ave.)
Program runs June 11-July 16

**Sign up early to get a spot!
Limited space is available.*

Also check out:

5 Days of Fun
Field Trip Frenzy
Super Summer Blast
T-Ball/Coach Pitch
Baseball
Kids Sport



Copperview Recreation Center
is Now Hiring for Summer Pro-
grams!!!



Visit our new web site at www.recreation.slco.org/copperview/



Register

By Mail or In person
Copperview Recreation Center or
8446 S Harrison Street
Midvale UT 84047

On-line
www.activityreg.com
\$2.00 service charge



"Improving Lives through People, Parks, and Play"

Check below which day your child will be at-

<p><u>Monday Dates:</u> June 8th June 15th June 22nd June 29th July 6th July 13th</p> <p style="text-align: right;">Check Here...</p> <div style="border: 1px solid black; width: 50px; height: 50px; margin-left: auto;"></div>	<p><u>Wednesday Dates:</u> June 10th June 17th June 24th July 1st July 8th July 15th</p> <p style="text-align: right;">Check Here...</p> <div style="border: 1px solid black; width: 50px; height: 50px; margin-left: auto;"></div>	<p><u>Thursday Dates:</u> June 11th June 18th June 25th July 2nd July 9th July 16th</p> <p style="text-align: right;">Check Here...</p> <div style="border: 1px solid black; width: 50px; height: 50px; margin-left: auto;"></div>
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Salt Lake County Parks & Recreation Copperview Recreation Center Registration Form



Name of child _____ girl ___ boy ___
PLEASE PRINT: (last name) (first name)

Address _____ City _____ State _____ zip _____

School _____ Grade _____ Birthday _____ Age _____

Parent or Guardian _____ Phone: _____ Work: _____

In emergency notify (other than parent or guardian) _____

Address _____ Phone: _____ Work: _____

How did you hear about us? School Flyer _____ Mailer _____ Other(explain) _____

Parental Statement of Agreement – Assumption of Risk, Liability Release and Refund policy

Release & Indemnification: I hereby recognize and acknowledge that my child's participation in recreational activities may involve bodily injury and/or emotional injury to myself and/or my child. In consideration of my child being permitted to participate in such events, I for myself, my child, my heirs, my executors and administrators, hereby voluntarily and knowingly indemnify and hold harmless, defend, release, waive and discharge Salt Lake County, and its officers, employees and volunteers from any and all suits, claims or liability, including negligence, based on any injury except that caused solely by the willful misconduct of Salt Lake County, that may result from my child's participation in Parks & Recreation activities. In addition, I agree that I or my insurance company will pay for medical, hospitalization and any other expenses resulting from my child's participation.

Refund Policy: As per Salt Lake County policy and procedures, the Parks & Recreation Division **may withhold 25% of the refund (program registration fee) for administrative costs.** All refunds must be requested in person, accompanied with a written refund request. **No refunds shall be given after the first day of the program.**

Collections: I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees, in the event that my account is referred to the Salt Lake County Attorney's office for collection. I understand that any account delinquent 30 days or more will be turned over to the Salt Lake County Attorney's Office for collection.

Emergency Treatment: I hereby authorize Salt Lake County Parks & Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise therefrom. I understand that I or my insurance company will be billed for such emergency treatment.

Equal Opportunity: I hereby authorize Salt Lake County Parks & Recreation provides equal opportunity to participate regardless of race, creed, gender, or ability to pay, and will, upon request, provide reasonable accommodations to individuals with disabilities. By signing this assumption of risk, liability release, indemnification, and refund policy statement, I acknowledge that I have read its contents and disclosure, and that I agree to its terms.

Signature (Parent or Legal Guardian): _____ Date _____

OFFICE USE ONLY... Receipt No. _____ Amt. \$ _____ Recv'd. by _____ Date _____
 Info Sheet _____