



PLEXCAMP

\$210 / Opelika Residents | \$231 / Non-residents | Fee includes activity fee

Choose Desired Session(s):

Session 1 – June 7-June 18

Session 3 – July 5-July 16

Session 2 – June 21-July 2

Session 4 – July 19-July 30

Child's Name: _____ Age: _____ Grade Completed: _____

Male Female School: _____ DOB: _____

Address: _____

Parent /Guardian Name: _____ Email: _____

Home Phone: _____ Parent/Guardian Cell Phone: _____

Work Phone: _____ Work Phone: _____

Emergency Contact: _____ Phone: _____

Relationship: _____ Physician's Phone: _____

Allergies/Special Considerations/Medical Problems : _____

T-Shirt Size: YS YM YL AS AM AL

AUTHORIZATION OF RELEASE

I _____ do hereby release and forever discharge and indemnify and hold harmless the Opelika Parks and Recreation Department, The City of Opelika, it's employees, as well as it's insurers and participants against loss from and against any and all claims, demands or actions in law or inequity that may hereafter at any time be made or brought by myself or anyone on behalf of said self for the purpose of enforcing a claim resulting in damage, injury, death or any other adverse result which may arise in connection with any association and /or participation in activities provided by the City of Opelika Parks and Recreation Department. It is agreed that this Release and Hold Harmless Agreement shall extend to and include all claims which may arise from any claimed or actual negligence, carelessness, fault, act or omission of either myself or the parties herein released. I acknowledge that the sole purpose of this agreement is to relieve the parties herein from all liability or exposure to liability regardless of the nature and regardless of causation. I also give permission for OPR to take photographs and/or videos of my child during activity for publicity use. Furthermore, please take caution when sending valuable, sentimental items with child/ward to any activities. OPR accepts NO RESPONSIBILITY for lost or stolen items. I hereby acknowledge that the terms herein are contractual in nature and that I have read and understand this Release Agreement.

Signature: _____ Date: _____

It is the policy of Opelika Parks and Recreation that no person shall, on the basis of race, color, creed, religion, sex, age, national origin or disability be denied employment, be excluded from participation in, be denied the benefits of, or be subjected to discrimination in any program or activity.