



COMMUNITY SERVICES DEPARTMENT

404 E. Florence Boulevard
 Casa Grande, AZ 85222
 (520) 421-8677
 Fax: (520) 421-8678
<http://www.casagrandeaz.gov>

**RESIDENT YOUTH PARTICIPANT APPLICATION
 2008 – 2009**

1. All participants must register each year for a Resident Youth Card. A completed Participant Information Form and proof of residency are required for registration. The first card is free and each replacement card costs \$5.00.
2. In addition, a Release of Liability and Assumption of Risk Agreement, Behavioral Contract and Computer Use Contract, must be signed by the participant and their parent or guardian and submitted to the Community Services Department.
3. Providing false information may result in disqualification from participation in City of Casa Grande Teen Center.

Please print information clearly.

Participant Information		
Participant Name (First, Last)	Date of Birth/Age	Contact #
Address (#, street, unit)	Email Address	
City, Zip Code	School	ID Number Grade
Main Contacts (Parent/Guardian)		
Mother's/Guardian Name	Contact #	Cell #
Father's/Guardian Name	Contact #	Cell #
Email Address:		
Emergency Contacts (Persons such as a relative or neighbor, other than parent or guardian)		
Name	Contact # or email	Cell #
Name	Contact # or email	Cell #
Please indicate any special needs or medical conditions that staff should be aware of:		
For Office Use: <input type="checkbox"/> Proof of Residency (School ID or Library Card) <input type="checkbox"/> Completed Participant Information section: all information is legible/readable <input type="checkbox"/> Signed Release of Liability and Assumption of Risk Agreement and Behavior Contract Comments: Entered into Computer by (staff)/date		

Please Complete the Back of this Document.

RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

In consideration of the acceptance of the application for participation in the activities at the City of Casa Grande Teen Center, I hereby waive, release and discharge any and all claims for damages for death, personal injury, or Property damage which I or my child may have, or which may hereafter accrue to me or my child as a result of my participation in said activity. This release is intended to discharge in advance the City of Casa Grande, City Council, its officers, agents, employees, and certified Teen Center volunteer from and against any and all liability arising out of or connected with my or my child's participation in said activity, even though that liability may arise out of negligence or carelessness, on the part of the persons or entities mentioned above.

I have read the description of City of Casa Grande Teen Center, and I am aware that this activity may subject myself or my child to physical risks and dangers. Nevertheless, I voluntarily agree to assume all risks of injury or death, and to release discharge, and hold harmless all of the entities or persons mentioned above whom, through negligence or carelessness, might otherwise be liable to me, or my heirs, personal representative, next of kin, spouse or assigns.

It is understood and agreed that this waiver, release, and assumption of risk to be binding on my heirs, personal representatives, next of kin, spouse and assigns.

I have carefully read this Agreement and fully understand its content. All participants registered in activities, including minor 12 years of age or in the sixth grade thru 18 years of age or a senior in high school, must sign this Agreement.

Date: _____

If you are between the ages of 12 -18, please sign here:

Signature: _____ Printed Name: _____

Please indicate whether you are signing as: Parent Guardian Participant 18 years of age

BEHAVIOR USE CONTRACT

I/We have read the Participant Behavior Standards and Discipline Plan* and fully understand its content. Furthermore, the significance of this Standard and Plan has been explained to the youth participant.

Parent(s) Signature: _____

COMPUTER USE CONTRACT

Student

I have read the City of Casa Grande Computer use policy and understand the provisions specified in it. By signing below, I agree to follow the rules specified in this policy. I understand that if I break the rules specified in this policy then the disciplinary actions outlined will result, and in addition, this may result in suspension from computer use at the Teen Center up to and including suspension from the Teen Center.

Participant Signature: _____

Parent

I/We have read the City of Casa Grande Computer use policy and understand the provisions specified in it. By signing below, we realize that our son/daughter

_____ must abide by the rules specified in this policy.

I/We understand that if our child breaks the rules specified in this policy then the disciplinary actions specified will result, and in addition, this may result in his/her suspension from computer use at the Teen Center up to and including suspension from the Teen Center.

___ Yes, I would like my child to have access to the CCGTC computers

___ No, I would not like my child to have access to the CCGTC computer

Parent(s) Signature: _____

***This information is available online and at the City of Casa Grande Community Services Department Teen Center.**