COMMUNITY SERVICES

PROGRAM REGISTRATION APPLICATION

Please use this form for fax, walk-in or mail-in registration. Registration is also available online at irvinequickreg.org.

PAYEE/ADULT INFORMATION (Please print all information.)

ADULT LAST NAME	ADULT FIRST NAME	BIRTHDATE	GENDER
			☐ M ☐ F
ADDRESS		**CITY**	**ZIP**
HOME PHONE	**ALTERNATE PHONE**	**E-MAIL FOR FURTHER NOTIFICATION**	
	☐ WORK ☐ CELL		

OTHER HOUSEHOLD MEMBERS (Including spouse, children, etc.)

LAST NAME	FIRST NAME	GENDER	BIRTHDATE	PHONE
		☐ M ☐ F		☐ WORK ☐ CELL
		☐ M ☐ F		☐ WORK ☐ CELL
		☐ M ☐ F		☐ WORK ☐ CELL

MEMBERSHIP (Not required)

50+ GOLD CARD (Adults 50 years and older): ☐ $10 IRVINE FINE ARTS: ☐ $40 Individual ☐ $60 Household ☐ $25 Senior/Student

PARTICIPANT AND COURSE INFORMATION (Attach additional sheets if needed.)

PARTICIPANT'S NAME	COURSE# AND TITLE	START DATE	ALTERNATE COURSE#	FEE

NON-RESIDENT FEE: ($5 x number of courses priced $10-$74) = _____

NON- RESIDENT FEE: ($10 x number of courses priced $75+) = _____

GRAND TOTAL: (Please may checks payable to CITY OF IRVINE) = _____

WAIVER (Read and sign Waiver. Registration will not be processed unless the Waiver is signed.)

In consideration of accepting this registration and to the extent permitted by law, I hereby agree to release, indemnify, defend and hold harmless on behalf of myself (and any minor children for whom I have the capacity to contract) the City of Irvine and its officers, clients, agents and employees from and against any and all liabilities, claims, penalties, losses, or expenses (including attorneys' fees), of any kind or nature whatsoever, whether related to bodily injury, property damage or any other form of injury or loss to myself (and to any minor children for whom I have the capacity to contract), caused by any negligent act or omission of the City of Irvine or its officers, clients, agents or employees, arising out of or in any way related to participation in the activity for which I (and any minor children for whom I have the capacity to contract) am registering. I acknowledge that the activity to which this release applies can be dangerous, and as a result of signing below, I am accepting those risks for myself and for any minor participants for whom I can contract.

I give permission to the City of Irvine to take photographs of me or my children while participating in this activity for use in future City publicity and understand that I will not receive any compensation for such use.

I certify that I have read and understand this Waiver and Release as it applies to myself and to any minors for whom I am signing.

X _____ DATE _____

(Parent/Guardian must sign for participants under 18 years of age)

PAYMENT (Make check payable to CITY OF IRVINE. Cash is only accepted with walk-ins only.)

☐ CHECK NO. _____ ☐ MONEY FROM ACCOUNT $ _____ ☐ CASH $ _____

☐ VISA ☐ MASTERCARD ☐ DISCOVER ☐ AMERICAN EXPRESS

_____ _____ _____ _____ SECURITY CODE _____ EXPIRATION DATE ___ / ___

NOTE: If the check amount is more than required, additional monies will be put on account for future registrations; if the check is less than required, the application will not be processed.

SIGNATURE _____

DELIVERY METHODS

-AUTOMATED: Online at irvinequickreg.org or by Touch-Tone at 949-222-2251

-WALK-IN: 1 Civic Center Plaza, 2nd Floor, Community Services

-FAX: 949-724-6608

-MAIL: CS-Reg, P.O. Box 19575, Irvine, CA 92623-9575