

EASY WAYS TO REGISTER

Go Online

Visit our web page
www.cameronpark.org

Mail In

To CSD office
2502 Country Club Dr.
Cameron Park 95682

Phone In

To CSD office
530-677-2231
M-F 8 am - 5 pm

In Person

Stop by and register
at the CSD office at;
2502 Country Club Dr.
M-F 8 am - 5 pm

Pre-registration is required for all programs. Some programs are in high demand and will fill quickly. Early registration is encouraged to ensure that programs are not cancelled due to low enrollment. Please note that there is a \$25 fee for returned checks.

Refund Policy: Full refunds will be given if

an activity or class is cancelled by CPCSD. Refund requests need to be made in writing at the CPCSD Office. Full refunds minus the processing fee will be processed when a 2 week notice is given prior to start of the program/class. Less than a 2 week notice refunds will be pro-rated to 50% due to staff level planning impacts. A "rain check

- household credit" in lieu of a refund can be provided. There will be a \$5 processing fee for each and every refund request/transfer. Refund checks take approximately 3-4 weeks to process. Refunds will not be granted for non-attendance, any excursions, trip or activities that require pre-paid admission, or material fees paid in advance.

Cameron Park Community Services District

Program Registration Form

You can also register online at www.cameronpark.org

Name: _____

Email: _____

Address: _____

Phone/cell phone: _____

City: _____ Zip: _____

Emergency Contact: _____

T-shirt size (if applicable) Youth _S _M _L Adult _S _M _L _XL

How did you hear about us?: _____

Participant's name:	Birth date	Grade	Class name	Code	Class Date	Fees

Please make checks payable to CPCSD

Total Fees enclosed \$ _____

Waiver: The enrolled named individual(s), or his or her legal guardian, has read the class description and understands the nature and content of the class, and in consideration of being permitted to participate in the class, agrees as follows:

In consideration of his/her permitted to participate in a class/activity sponsored by the Cameron Park Community Services District (CSD), for myself, my spouse, and my child, do release and forever discharge the CSD, its directors, employees and instructors from any and every claim, demand,

action or right of action arising from or by reason of any bodily injury or personal injuries, death or property damage which may occur as a result of his/her participation in the current enrolled class or any activities in connection with the current enrolled class, whether or not caused by any act or omission of the CSD, its directors, employees, or instructors.

Cameron Park Community Services District does not have or provide medical or accident insurance for persons involved in programs sponsored by the Cameron Park Community Services District.

PHOTOGRAPHY RELEASE: By signing this waiver, I understand that the CSD staff or agents may photograph me and/or my minor children and that the CSD may use such photographs to promote recreational programs now and in the future. I expressly allow, and hereby waive any objection to the CSD or its agents photographing me and/or my minor children when I and /or my minor children are participating in CSD programs and activities. I understand that the photos shall remain the property of the Cameron Park Community Services District.

For Office Use Only	Receipt # _____
cash <input type="checkbox"/>	check <input type="checkbox"/>
credit card <input type="checkbox"/>	

Visa /Mastercard/American Express # _____

Exp. Date: _____ 3 digit security Code: _____

I have read the above information and agree to its terms.

Today's Date: _____

Participant's Signature _____
(Parent or Guardian if under 18)