

Centre Region Parks and Recreation Registration Form



Three easy steps to register online for your favorite program or special event! The best part, no user fees!

1. Browse our programs and events in this Active Guide!
2. Log-on or create an account to register by visiting www.crpr.org and clicking "Register Online!" If you already have an account and forget your password, call CRPR; we can help!
3. Shop for your programs and check out!
4. Questions? Call CRPR at 814-231-3071; staff are available Monday-Friday 8 AM-5 PM.

IMPORTANT REGISTRATION INFORMATION

GENERAL

- Most programs have limited enrollment. Registration is accepted on a "first-come, first-serve" basis. Registrations are processed in the order they are received at the CRPR office, and program/event fees must be paid at the time of registration.
- How to read Program Fees:
Resident Fee (R): For residents of State College Borough & the Twps. of College, Ferguson, Harris and Patton.
Nonresident Fee (NR): For residents of all other municipalities.
- No registrations or payments can be accepted by CRPR instructors, unless specific info. is provided within a program description.
- CRPR reserves the right to adjust program meeting schedules, pending weather conditions and facility availability.

REFUNDS

- If a refund request is made at least 7 calendar days prior to the start of the program / camp week, a full refund (less a \$5 processing fee) is provided for the program.
- If a refund request is due to injury or illness after a program starts, a prorated refund is provided (a doctor's excuse may be required).
- If a program or class is canceled, a full or prorated refund or credit is provided.

CANCELLATIONS

- News bulletins regarding cancellations are listed on the CRPR Urgent Alert bar on our website homepage at www.crpr.org
- Like us on Facebook and follow us on Twitter and Instagram for the latest on cancellations and programs updates!

CRPR YOUTH SCHOLARSHIPS

- We welcome Centre Region youth to participate in CRPR programs and activities and we may be able to provide **reduced fees to qualified youth** registering. **Contact CRPR at 231-3071 or visit www.crpr.org for an application and additional information. Scholarship information is confidential.**



CRPR Registration Form

Payer/Parent Information

Name: _____ Phone (H): _____ Phone (W): _____ Phone (C): _____

Address: _____ State: _____ ZIP: _____

E-mail: _____

Resident of (please check one):

State College Borough
 College Twp.
 Harris Twp.
 Patton Twp.
 Ferguson Twp.
 University Park
 Other (Nonresident Rate)
 Halfmoon Twp. (Nonresident Rate)

Full Name of Participant	Date of Birth	Current Grade	Gender (M/F)	T-shirt Size	Program Number	Program Number	Program Number	Fee
Total Enclosed (payable to CRPR)								

AGREEMENT, WAIVER, AND RELEASE: In consideration of being accepted by Centre Region Parks and Recreation to participate in activities at Centre Region Parks and Recreation owned and/or managed facilities, I certify that I am the Participant and I hereby waive, release, and discharge any and all claims for damage for personal injury, exposure to and/or development of communicable diseases, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in activities at said facilities. This release is intended to discharge in advance the Centre Region Parks and Recreation Authority, Centre Region Parks and Recreation Agency, associated persons and organizations, officers, employees, and agents from any and all liability arising out of or connected in any way with my participation in activities at any Centre Region Parks and Recreation owned and/or managed facility even though that liability may arise out of negligence or carelessness on the part of those parties. It is understood that activities such as the ones I will be participating in involve a danger of accidents and an element of risk, including via physical proximity to instructors and participants, and knowing those risks, I hereby assume those risks. I understand that accidental injury insurance is not provided to me. It is further agreed that this waiver, release, and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold harmless, the Centre Region Parks and Recreation Authority, the Centre Region Parks and Recreation Agency, associated persons and organizations, officers, employees, and agents from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any illness, injury or property damage that I may sustain while participating in any activity at any Centre Region Parks and Recreation owned or managed facility. I authorize emergency treatment by a licensed physician, EMT, registered nurse, athletic trainer, or certified First Aid/CPR/AED provider if needed during my activity participation. I understand that by participating in this activity, that I authorize Centre Region Parks and Recreation Staff to take digital images during this activity to be used in any or all Centre Region Parks and Recreation publications, websites, and social media.

CONSENT OF PARENT/GUARDIAN (If Participant is a minor): I am the parent or legal guardian of the Participant noted in the registration form. I hereby consent that the Participant may participate in activities at any Centre Region Parks and Recreation owned and/or managed facility and I hereby execute the Agreement, Waiver and Release on the Participant's behalf. I hereby affirmatively state that the said Participant is physically able to participate in said activity. I hereby agree to indemnify and hold harmless the persons and entities mentioned above from any loss, liability, damage, cost, or expense that they may incur as result of the death, exposure to any pathogen or any illness, injury or property damage that said Participant may sustain while participating in activities at any Centre Region Parks and Recreation owned and/or managed facility. I authorize emergency treatment for this Participant by a licensed physician, EMT, registered nurse, athletic trainer, or certified First Aid/CPR/AED provider if needed during the activity participation. I understand that by this Participant's enrollment in this activity, that I authorize Centre Region Parks and Recreation Staff to take digital images of said Participant during this activity to be used in any or all Centre Region Parks and Recreation publications, websites, and social media.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE CENTRE REGION PARKS AND RECREATION AUTHORITY AND CENTRE REGION PARKS AND RECREATION AND I ACKNOWLEDGE IT OF MY OWN FREE WILL.

PAYMENT METHOD: CHECK MONEY ORDER MASTER CARD VISA DISCOVER AMEX

Credit Card Number: _____ 3-Digit Security Code: _____

Your Signature: _____