4 EASY WAYS TO REGISTER!

1

Online
Access WebTrac, our newly enhanced online registration system at:

http://webtrac.folsom.ca.us

2

Mail
Folsom Parks & Rec
50 Natoma St.
Folsom, CA 95630
Mail completed registration form with check, money order or credit card information.

3

In-Person
Register in person at 48 Natoma Street
(located next to Folsom City Hall)
Registration Hours
Monday-Friday
9 a.m.-4:30 p.m.

4

FAX
351-3364

For more information, call (916) 355-7285

Program Cancellation Policy: Folsom Parks & Recreation reserves the right to add, cancel or make program changes. Full refunds will be given if the activity is cancelled by Folsom Parks & Recreation. Transactions originally paid in cash or by check will be refunded by check and can take up to three weeks to process the refund; activities paid by credit card will be refunded back to the credit card.

Refund/Credit Policy:
Participants cancelling more than 14 days before the class start date: will be assessed a $10 administrative fee and refunded the balance.

Participants cancelling within 14 days of the class start date: will be assessed a $10 administrative fee and the balance will be credited to their Parks & Recreation household account to be used for registration(s) at a later date.

Refunds requested on or after the day an activity is scheduled to begin: Refunds or credits will not be granted.

Note: Refunds will not be granted for any pre-paid excursions or activities that require pre-paid admission. Some programs require special refund policies; if special refund policies apply to this registration see Special Cancellation/Refund Policy on your receipt.

Folsom Recreation Registration Form

– Please Print – SMR 2014 **– Please Print –**

Your Name _____ Cell Phone _____ Home Phone _____

Work Phone _____ E-mail _____

Address _____ City _____ Zip _____

Emergency Contact Person _____ Emergency Cell Phone _____

Participant's Full Name	Birthdate	Program Title	Activity Code	Class Date	Fees

❑ **Folsom Resident** ❑ **Non-Resident** *(Please make checks payable to: City of Folsom)* **Total Fees Enclosed:** $ _____

I agree to indemnify and hold harmless The City of Folsom Parks & Recreation Department, The Folsom Cordova School District, their employees, contractors and officers and any other cosponsoring agencies from any and all liability for injuries or damages which may arise as a result of participation in this activity. I further agree that The City of Folsom Parks & Recreation Department may act in an emergency as best fits the situation in the event either myself or emergency contact cannot be reached. I am aware that the sponsoring organizations do not carry medical insurance for participants in this activity. I have read and understand the refund policy. **The City of Folsom's meetings, facilities, activities, and programs are accessible to persons with disabilities.** If you require a reasonable accommodation to participate, please call (916) 355-7285 a minimum of three business days prior to the meeting, activity or program. Reasonable accommodations for various disabilities may require more time to accommodate.

PHOTOGRAPHY NOTE: By signing this waiver, I understand that city staff may photograph me and/or my minor children and that the city may use such photographs to promote city programs now and in the future. I expressly allow, and hereby waive any objection to, the city's photographing of me and/or my minor children when I and/or my minor children are participating in a city recreation program. I understand all photos will remain the property of the City of Folsom Parks & Recreation Department.

E-mail: When you provide us with your e-mail address, you understand that you may receive occasional e-mail announcements relating to Folsom Parks & Recreation programs, events, and services. Folsom Parks & Recreation respects your privacy and does not rent or sell your e-mail information. You may opt out of receiving these e-mails at any time by replying to the message or by calling 355-7285.

OFFICE USE ONLY
❑ Cash ❑ Check ❑ Charge ❑ Phone Order
Receipt # _____ Initals _____

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

VISA/MC/DISCOVER/AMEX # _____ Expires _____ CVV _____

_____ Cardholder's Signature _____ Today's Date _____
PRINT CARDHOLDER'S NAME AS IT APPEARS ON CARD