



JMB Community Center & Halle CAC Programs

*Note: This form is not used for athletic leagues

PROGRAM REGISTRATION FORM

P.O. Box 250, Apex, NC 27502 | (919) 249-3402 | www.apexnc.org

Participant Information

Participant's First Name		Last Name		
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Other	Date of Birth / /
Street Address				
City		Zip		
Primary Phone	<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell			
Primary Email				
Emergency Contact & Relationship			Emergency contact Phone	

I would like the Apex Parks, Recreation and Cultural Resources to know the following information regarding this participant:
Medical Conditions **Allergies** **Special Needs** **None/Not Applicable**

If yes to any of the above, please explain in detail:

Does the participant need a modification(s) to participate? **Yes** **No**
 If yes, someone from inclusion services will follow-up with you regarding your request. The Apex Parks, Recreation and Cultural Resources welcome the participation of individuals of all abilities. In compliance with the ADA, we will provide reasonable modifications to facilitate participation in our program. To ensure that reasonable modifications are in place, modification requests should be received at least two weeks prior to the start date of the program. For more information, please contact Allie Prelaske at 919-249-3507.

Primary Parent/Guardian Name (if participant is under age 18)		Date of Birth	/	/
Primary Parent/Guardian Phone (if participant is under age 18)	<input type="checkbox"/> Same as above <input type="checkbox"/> Other			
Primary Parent/Guardian Email (if participant is under age 18)	<input type="checkbox"/> Same as above <input type="checkbox"/> Other			

Course Code	Course/Program Name	Fee
		\$
		\$
		\$
		\$
		\$

Photo/Video Policy
 I hereby grant the Town of Apex permission to use my likeness without individual identifying information in a photograph or video in any and all of its publications, website, social media and video programming, without payment or any other consideration. I hereby irrevocably authorize the Town of Apex to edit, alter, copy, exhibit, publish or distribute all submitted photos, videos, or other artwork for purposes of publicizing the town's programs and facilities, or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph or video. I hereby hold harmless and release and forever discharge the Town of Apex from all claims, demands and causes of action which I, my heirs, representatives, executors, administrators or any other persons acting on my behalf, or on behalf of my estate, have or may have by reason of this authorization.

Statement of Waiver
 I, for myself or as parent or guardian, hereby assume all the risks and hazards incidental to the conduct of the activities, including but not limited to, transportation to or from activities, and potential exposure to COVID-19 or other airborne illnesses. I release, absolve, and indemnify the Town of Apex, employees of the Town, volunteers, volunteer facilitators, contractors and/or sponsors from all risks and hazards associated with the activities, both on Town property and off-site, and in the event of injury, do expressly waive all claims against them. I understand that no insurance coverage is provided by the Town of Apex Parks, Recreation and Cultural Resources Department. I further give permission for proper emergency care to be rendered to myself or child should I not be available or able to give such permission. As part of this approval, I acknowledge I may have the opportunity to review the premises, equipment and personnel qualifications to be used in conducting the activity. I also have the opportunity to discuss with program organizers potential hazards and risks that may be associated with the activity and take responsibility for doing so. Failure to exercise this option indicates my approval and acceptance.

By signing below, you are agreeing to the Town of Apex's Statement of Waiver and acknowledging that you have read the Town of Apex's Photo/Video policy. To opt out of the Photo/Video Policy, you must email peakconnect@apexnc.org including the participant's name and which program(s) they are registered for.

Participant's Signature (or Parent/Guardian)		Date	/	/
-----------------------------------------------------	--	-------------	---	---

For Department Use Only	
DATE PAID:	Staff Initials:

APRCR Policies

Refund Policy Full Refunds-Registration fees are 100% refundable when programs and events are canceled or adjusted by the Apex Parks, Recreation, and Cultural Resources Department. The Director of Parks, Recreation, and Cultural Resources shall have the authority to make decisions on all requests not specifically covered herein. **Withdrawals/Transfers-** **1. Withdrawal 10 Calendar days or more in advance.** A participant requesting to withdraw from a class must provide a written request at least 10 calendar days in advance of the scheduled start date of the program. The participant will receive the full refund of fees minus a \$5.00 processing fee. **2. Withdrawal less than 10 Calendar days in advance.** A participant requesting a refund in writing, less than 10 calendar days prior to the scheduled start date of the program, will receive a 75% refund of the fees only if the participant can be replaced from the waiting list. If there is not a waiting list for the program or athletic league then no refund will be issued. **3. Withdrawal after First meeting of a program/First regular season game.** A participant requesting to withdraw, on the day of or after the first meeting of any program, or the first regular season game of the affected league, will not be issued a refund. **4. Transfer Request.** A participant requesting to transfer from one class date to another, within the same program and registration period, must do so in writing at least 10 calendar days or more prior to the scheduled start date of the program. **5. Adult Team Withdrawals.** Refunds for adult athletic programs requiring "team" registration will be issued based on policies and procedures covering that particular program and are not subject to #s 1, 2, 3, and 4 above. **6. Youth Sports League Withdrawals.** If there is a tryout for the athletic league, a full refund minus a \$5.00 processing fee will be issued if a written request to withdraw is made prior to the tryout day for the league. If the written request is made after the tryout for the athletic league, a 75% refund will be issued only if the participant can be replaced from the waiting list. **7. Ticketed Events.** All ticket sales are final. Refunds and withdrawals are not permitted. **8. No refunds will be issued when the amount is less than \$6.00. Medical and Scholastic Exceptions- A full refund of all fees paid, minus a \$5.00 processing fee, will be made for Athletic and Non-Athletic Programs only if:** **1.** Prior to the first meeting of a program or the first game of the regular season the participant requests a refund in writing *including a written excuse from a licensed medical doctor indicating that the participant should not participate due to medical concerns or physical limitations.* **2.** Prior to the first meeting of a program or the first game of the regular season the participant requests a refund in writing *including written verification that the participant has been included in either a Middle School, High School, or College program that prohibits participation in recreational programs.* Written verification can include a letter from the team coach, an official team roster from the school or other school document indicating the school policy which prohibits the registrant's participation. **Senior Trips-** **1.** If a refund is requested, in writing, prior to the registration deadline, a full refund minus a \$5.00 processing fee will be made. **2.** If a refund is requested, in writing, after the registration deadline, and 48 hours prior to trip departure, a 75% refund will be issued only if the participant can be replaced from the waiting list. If there is not a waiting list for the program, then no refund will be issued. **3.** If 48 hours prior to the trip departure, a written excuse from a licensed medical doctor is provided, indicating that the participant should not participate due to medical concerns or physical limitations, a partial refund will be issued after deducting expenses incurred by the Town of Apex / Apex Parks, Recreation and Cultural Resources Department- such as prepaid admission fees, tickets, deposits, and a \$5.00 processing fee. **4.** For situations where non-refundable deposits and admission fees must be paid in advance by the Town, no refunds will be given to participants who cancel. **Medical Treatment Policies A. Medication –** Program participants with certain medical conditions may require daily treatment to ensure their health and well-being and therefore will need access to medication as required. When requested by a participant, the Town will store all medication in a secured location and make it available to participants in accordance with physician and/or parent/guardian instruction. Participants with severe allergies, such as allergies to bee stings, peanut products, foods, etc., may be at risk of a serious reaction in a Parks and Recreation setting due to contact with or ingestion of the allergen. Contact with these allergens can result in anaphylaxis, a severe allergic reaction with symptoms that may include swelling of the face, lips, and tongue, hives, vomiting, diarrhea, difficulty swallowing, shortness of breath, and difficulty breathing. The Town of Apex is concerned for the health and safety of all participants in any program offered by the Town's Parks, Recreation and Cultural Resources Department. When a participant has alerted the Town to a medical condition or severe allergy and may require the assistance of staff to administer medication, the "Assisted Administration of Medication Form" must be completed. **This document can be found online at www.apexnc.org/medicalforms.** **2.** Parent(s)/guardian(s) shall provide all equipment, medications, and materials necessary for the Town to comply with the guidelines and instructions provided in the Administration Form. All medication must be properly labeled, current, and in its original container. **B. Emergency –** In the event of an emergency in which the parent(s)/guardian(s) or listed emergency contacts cannot be reached, APR&CR will contact emergency medical personnel and pending their arrival, take those actions that are in the APR&CR's judgement to be in the best interest of the individual participant. **Sunscreen and Insect Repellent Policy-** Sunscreen and Insect Repellent (lotions and sprays) must be self-applied by the participant. We recommend that the participant apply sunscreen and/or repellent before attending the program. APR&CR Staff are not permitted to administer sunscreen or insect repellent. **Inclement Weather Policy -** I understand that the program may not be available when the Town and its facilities are closed. Please call the *Weather Hotline 919-249-3348* for the most updated information. **Inclusion Services-** Apex Parks, Recreation and Cultural Resources welcomes the participation of individuals of all abilities. In compliance with the ADA, we will provide reasonable modifications to facilitate participation in our programs. Reasonable modifications are resources used to help allow a person with a disability to participate in any program. Resources may include, but are not limited to, auxiliary aids or services, adaptive equipment, additional staff training, and/or additional staff. Please note that APR&CR does not provide 1:1 support. Any modification that the Department considers cannot fundamentally alter a program. To ensure that reasonable modifications are in place, modification requests should be received at least two weeks prior to the start date of the program. For more information, please contact Inclusion Services at emily.saunders@apexnc.org. **Behavior Management Policy-** APR&CR strives to provide a safe, positive, and inclusive environment where all participants can enjoy and benefit from programs and activities. Participants are expected to behave appropriately and demonstrate respect for others, staff, equipment, and facilities at all times. APR&CR Staff use behavior management tools such as praise, modeling, redirection, and positive reinforcement to encourage appropriate behavior. These tools aim to help participants demonstrate self-control, problem-solving skills, and respect for others. Our programs will create an environment that encourages positive choices through understanding participants' basic needs and explaining program expectations. In the event praise and positive reinforcement do not accomplish the desired outcomes or in the event the behavior is such that more definitive action is needed, APR&CR will address the behavior according to its type and severity. **1. Disruptive Behaviors** (e.g. refusal to follow directions, disrespecting staff, interrupting activities): Staff will use behavior management tools. Continued behaviors will result in a verbal warning, written incident reports, and progressive consequences, up to and including suspension from the program. **2. Aggressive and/or Destructive Behaviors** (e.g. hitting, biting, vandalism, throwing objects): The participant will be separated from the group, and parents/guardians (if applicable) will be contacted to pick up the participant immediately. Depending on the situation, the participant may be suspended while the incident is reviewed. Severe cases or situations involving immediate danger will result in calling 911. **3. Illegal Behaviors:** 911 will be called immediately, and the participant will be suspended from all programs pending review. **4. Unsportsmanlike Behaviors** (e.g. harassment, fighting or disrespect during games): May result in warnings, ejection, and suspension from current and/or future games or seasons.

Special Considerations: For participants whose behavior is connected to a disability, Specialized Recreation and Inclusion Staff may develop an inclusion plan outlining strategies for support and communication. However, all participants are expected to engage respectfully and safely in programs and activities. **Behavior Incident Reports:** **1.** A First Written Behavior Incident Report results in participants being removed from the program for the remainder of the day. **2.** A Second Written Behavior Report results in the participant being asked to leave and removed from the program for at least one full day. **3.** A Third Written Behavior Report will result in the participant being asked to leave and suspended for the remainder of the program. APR&CR reserves the right to remove or suspend participants when behaviors compromise the safety or enjoyment of others. No refunds or credits will be issued for days when a participant is suspended or removed.

I have read, understand and agree with all of the policies as stated in this document and I have discussed the expectations of behavior with my child. I understand the Town of Apex Parks, Recreation and Cultural Resources has the authority to revoke my child's right to participate in APR&CR programs for behavior which is not in keeping with the mission of the APR&CR or for failing to follow the policies/procedures of APR&CR. My signature on the previous page indicates that I agree to adhere to all policies, procedures and rules of APR&CR.