



Junior Development Program Registration Form 2021

JDP Drills @ CPAC East (Ages 9 – 15)

Session 1: June 14 – July 9 (4 weeks)

Session 2: July 12 – August 6 (4 weeks)

Please CHECK Appropriate Session(s) and Days:

4:00-5:00 pm (9-11yr olds)

Monday **and** Wednesday

Session 1 - \$304

Session 2 - \$304

Tuesday **and** Thursday

Session 1 - \$304

Session 2 - \$304

5:00-6:00 pm (12 and older)

Monday **and** Wednesday

Session 1 - \$304

Session 2 - \$304

Tuesday **and** Thursday

Session 1 - \$304

Session 2 - \$304

Total Amount: \$_____ Signature X _____
My signature indicates I have read and agree with the terms and conditions on the Participant Waiver (reverse side) and also authorizes the credit card payment below.

For more information please contact Donna Marks (DonnaM@cpacweb.com)

Student Information:
 Name: _____ DOB: _____
 Address: _____
 City: _____ Zip: _____
 Phone # _____
 Email: _____

Medical Concerns
 Please note any diet limitations, allergies, medications, or additional conditions which may affect participation.

Billing Method:
 House Charge (Please use card on file)
 Credit/Debit Card (Please use card below)

**CPAC requires a method of payment on file in our secure system. This allows you to make purchases on your house charge account. Credit cards will be charged on the 1st & 16th of each month for any outstanding balances.*

Card# _____ **Exp** _____
We accept Visa, Mastercard, and Discover

Name _____ **CVV#** _____

CPAC West: 10 Marriott Drive, Lincolnshire, IL 60069
(P) 847-276-2400

CPAC East: 2223 Half Day Rd: Bannockburn, IL 60015
(P) 847-948-5330 (F) 847-948-0162

Participant Liability Waiver and Hold Harmless Agreement



**PLEASE READ AND SIGN
ON THE REVERSE SIDE**

will be responsible for payment of any and all medical services rendered.

Please read this form carefully and be aware that by registering for and participating in this program(s), or by registering your minor child / ward for participation in this program(s), you will be waiving your rights and/or the rights of your minor child / ward to all claims for injuries you or your minor child / ward might sustain arising out of this program(s) and you will be required to indemnify, hold harmless, and defend the College Park Athletic Club and all the employees and agents of College Park Athletic Club for any claims arising out of participation in said program(s).

Credit Card Authorization

College Park Athletic Club membership includes access to a house charge account to be used for service and Pro Shop purchases during the month. The Electronic Funds Transfer (EFT) system retains Credit Card information that is processed at the end of each billing period to pay the balance on this account via Credit Card charge or Debit Card.

Risk of Injury

"As a participant in the programs of College Park Athletic Club, or as a parent or legal guardian of a participant under 18 years of age, I recognize and acknowledge that there are certain risks of physical injury, and I agree to assume the full risk of injuries, including death, damages, or loss which I may sustain as a result of participating in any and all activities and programs of College Park Athletic Club."

Waiver of Injury Claims

"I agree to waive and relinquish any and all claims I may have arising out of, connected with, or in any way associated with the activities and programs of College Park Athletic Club."

Release from Liability

"I do hereby fully release and discharge the College Park Athletic Club and its officers, agents, and employees from any and all claims from injuries, including death, damage or loss which I or my minor child / ward may have or which may occur on account of participation in the program."

Indemnity and Defense

"I further agree to indemnify, hold harmless and defend the College Park Athletic Club and its officers, agents, and employees from any and all claims from injuries, including death, damages and losses sustained by me or my minor child / ward and arising out of, connected with, or in any way associated with the activities and programs of College Park Athletic Club."

In the event of any emergency, I authorize College Park Athletic Club to secure from any licensed hospital, physician, and/or medical personnel any treatment deemed "reasonable and necessary for my minor child's i

Transportation Liability Waiver

"In consideration of my minor child/ward being allowed to be transported by automobile by a CPAC Staff member, as the Parent or legal guardian of a participant under 18 years of age, I recognize and acknowledge that there are certain risks of physical injury associated with being transported by automobile by a CPAC staff member. I agree to assume the full risk of injuries that may be sustained by any minor child/ward of mine, as a result of being transported by a CPAC staff member. I agree to waive and relinquish all claims on behalf of my minor child/ward that the minor child/ward may have against College Park Athletic Club as a result of the minor child/ward's being transported by automobile by a CPAC staff member.

"I do hereby fully release and discharge College Park Athletic Club and its officers, agents and employees from any and all claims from injuries, damage or loss which I, or any minor child/ward may have or which may occur to my minor child/ward on account of his/her being transported by automobile by a CPAC staff member. I further agree to indemnify and hold harmless and defend CPAC, its officers, its agents and employees from any and all claims sustained by me or my minor child/ward, and arising out of, connected with, or in any way associated with being transported by automobile by a CPAC staff member."

Promotional Release

"I hereby authorize College Park Athletic Club and any of its authorized agents to use my child's photographic image for any electronic or non-electronic form or media for promotional purposes."

I have read and fully understand and agree to the above Participant Liability Waiver and Hold Harmless Agreement.

Please sign on reverse side