

Aycock Recreation Complex

A completed registration is required for all types of memberships.

Please PRINT clearly

Name _____ Date of Birth _____ / _____ / _____
(First) (MI) (Last)

Address _____ NC _____
(Street) (City) (Zip Code)

Phone (_____) _____ - _____ Sex: M F County / Non-County

Parent/Guardian _____ Phone (_____) _____ - _____

Emergency Contact _____ Phone (_____) _____ - _____

Type of Membership:

- Youth Daily Adult Daily Senior Daily Family Pass
 Youth Monthly Adult Monthly Senior Monthly Senior Family Pass
 Adult Monthly Employee Senior Monthly Employee Family Pass Employee

*Special Needs: The Henderson-Vance Recreation & Parks Department will attempt to provide reasonable accommodations for program participants when the need for accommodation is requested well in advance. To insure a medically safe and appropriate planned program, please list any special need or precaution which may require program accommodations for participating (i.e., visual or hearing impairment, mental or physical disability, heart condition, history of seizures, asthma, ADD, etc.)

Participant Agreements

I authorize the Henderson-Vance staff to seek appropriate medical (physician, dentist, nurse, etc.) care for the above named participant and I agree to pay for said care. Pictures may be taken of the above participant while participating in activities and may be used for program publicity. I, the above named individual, hereby give my approval for my participation in any and all activities of the Recreation Department. I assume all the risks and hazards incidental to the conduct of these activities, transportation to and from the activities, and I do further hereby release, absolve, indemnify, and hold harmless the Department, its agents, officials, sponsors and employees any or all of them. In case of injury to me or my child/dependent, I hereby waive all claims against the Department, its agents, officials, sponsors, and employees any or all of them.

Non-Discrimination Policy: The Henderson-Vance Recreation Department does not discriminate on the basis of race, color, national origin, sex, religion, age, sexual orientation or disability in employment opportunities or the provision of services, programs or activities. A participant alleging discrimination on the basis of any of the aforementioned areas may file a complaint with the Director of the Henderson-Vance Recreation and Parks Department or the Office of Equal Opportunity, US Department of the Interior, Washington, D.C. 20240.

Print Guardian/Parent/Adult Participant

Sign Guardian/Parent/Adult Participant

Date

****You must be 15 years or older to use the fitness room****