



CITY OF LAS VEGAS
ABE MONTROYA RECREATION CENTER
 Presenting
KENPO KARATE LESSONS

AGES 6 TO ADULT

Session 1: October 1 - Oct 24 (Tues & Thur)

Session 2: Nov 5 - Nov 28 (Tues & Thur)

CHILDS NAME: _____ AGE: _____ DATE OF BIRTH: _____

ADDRESS: _____ CITY: _____ STATE: _____ GRADE: _____

EMAIL: _____

PARENT NAME: _____ PRIMARY CONTACT PHONE: _____

RELATIONSHIP: _____

PARENT NAME: _____ CELL PHONE: _____

EMERGENCY CONTACT: _____ PHONE #: _____

RELATIONSHIP: _____



FOR OFFICIAL USE ONLY

\$50.00 EACH SESSION (\$40.00 FOR SECOND/THIRD CHILD)

Session 1: October 1 - Oct 24 (Tues & Thur)

6:00pm - 6:50pm Children's Lessons - Ages 6 to 10 year olds: _____

7:00pm - 7:50pm - Ages 11 to Adult: _____

CLERKS: PLEASE PLACE THIS INFORMATION ON THE RECEIPT OR COMMENT SECTION

Session 2: Nov 5 - Nov 28 (Tues & Thur)

6:00pm - 6:50pm Children's Lessons - Ages 6 to 10 year olds: _____

7:00pm - 7:50pm - Ages 11 to Adult: _____

CLERKS: PLEASE PLACE THIS INFORMATION ON THE RECEIPT OR COMMENT SECTION

AMOUNT PAID: \$ _____

PAYMENT TYPE: (check/cash) CK #: _____

CLERK SIGNATURE: _____ DATE: _____

**ALL RECEIPT'S MUST BE ATTACHED TO THIS FORM AND PARTICIPANTS NAME/NAMES
 MUST BE ON RECEIPT (multiple children - make multiple receipts)**

RELEASE OF LIABILITY

I/We do hereby agree to release, hold harmless, and forever give up claim against the City of Las Vegas, Abe Montoya Recreation Center, or any of its agents, representatives, and staff, Instructors, and volunteers that may arise for damages on account of bodily injury or property damages arising in any manner out of participation in the Recreation Department program.

I, understand that by me _____ or my child _____ participating, there is a chance of injury including, but not limited to, muscle sprains, strains, scratches, cuts, bruises, sunburn, bug bites, bone breaks, head injuries, possible paralysis and or death; I am intending to be legally bound, and do hereby, for my child, heirs, my personal representatives and assigns, waive, release and forever discharge any claims for damages which may have or may hereafter occur to my child against the City of Las Vegas, recreation staff, Instructors and volunteers, from claims, injuries, or actions sustained or suffered in connection with me/my child's association, entry or arising from my child's participation in said recreation activities and programs.

PRINT PARENT/GUARDIAN/PARTICIPANT

SIGNATURE PARENT/GUARDIAN/PARTICIPANT