

How to Register

SET UP YOUR ACTIVE NET ACCOUNT

- Go online to the Department website (www.CulpeperRecreation.com) and select 'Programs & Online Registration' on the left, and then select "Create an Account" on the top right. Once your account is set up you can register online.
- OR
- Complete the "ActiveNet Customer Account Form" available below or download from our website and mail it to the Parks & Recreation Department.
- Registrations cannot be processed until the "ActiveNet Customer Account Form" has been received and processed by the Department; or you have set up your account online.

ONLINE

- You can register from the convenience of your home or anywhere you have internet access, go online to the Department website and click "Activities"
- Upon registering you will automatically receive an email confirmation and receipt.

BY MAIL

- Complete a registration form and mail with payment, credit card, cash, check or money order payable to:
Culpeper County Parks and Recreation, 16388 Competition Drive, Culpeper, Virginia 22701.
- The Parks and Recreation Department does not provide confirmation calls. Confirmations are done by email. If you don't have email and **you require** registration confirmation, please include a self-addressed, stamped envelope.

WALK-IN

- Registration will be accepted at the Parks and Recreation Office, at 16388 Competition Drive from 8:00 a.m. to 9:00 p.m., Monday through Saturday, and 10:00 a.m. – 6:00 p.m. (except holidays).

ADDITIONAL REGISTRATION AND PROGRAM INFORMATION

REGISTRATIONS:

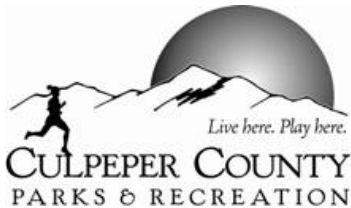
- Registration begins the day the newsletter goes in the mail (normally Fridays).
- Full payment must accompany registration in the form of credit card, cash, checks, or money order.
- Registrations are accepted on a first come first served basis.

REFUNDS:

- If a participant needs to withdraw from a program, a full refund will be issued if the Parks and Recreation Department has been notified before the start of the second class.
- Refunds for one-day activities and all bus/van trips will be given in full prior to the Register By date. After the Register By date, refunds, less a \$3 processing fee, are **only given** if a substitute(s) is found and that substitute(s) registers with the Department before the activity/trip date.

CANCELLATION POLICIES:

- The Parks and Recreation Department reserves the right to cancel activities for any reason. Refunds are given for any canceled programs.
- The Parks and Recreation Department programs can be cancelled in the event of snow, ice or other inclement weather.
- Please listen to the following radio stations for closing announcements: 103.1 FM, 105.5 FM, or visit www.cancellations.com or www.facebook.com/CulpeperRecreation



Please remember you **MUST** already have an ActiveNet account set up to register by mail.

Registration Form

One household per registration form please. Photocopies of form are acceptable.

Account Main Contact Name: _____ Home Phone: (____) _____

Participant Name	Birth date	Activity Name	Code	Day	Date(s)	Time	Fee
Jane Sample	8/ 1 /1991	Sample Drawing	1610.0005	M	3/2-3/30/09	6-8p	\$50.00
	/ /						\$
	/ /						\$
	/ /						\$
	/ /						\$
	/ /						\$
Total (Pay this amount)							\$

Assumption of Risk, Release from Liability, & Covenant Not to Sue:

In agreeing to participate in the program, as an adult participant or as a parent or a legal guardian of a minor participant, I and/or the participant do hereby affirm that the general health of the participant is good, and that the participant is not adversely affected by exercise, and that the participant is capable of performing an activity of this nature.

In consideration of participating in this activity, I and/or the participant do hereby covenant not sue the County with regard to any action, cause of action, claims, and demands of every kind or nature whatsoever that I and/or the participant have or which arise from or in connection with my participation in this activity. In consideration of participating in this activity, I and/or the participant do hereby assume all risk of any injury to the participant and will indemnify and hold harmless, from any and all liability, action, cause of action, claims, and demands of every kind or nature whatsoever that I and/or the participant have or which arise from or in connection with my participation in this activity, the County of Culpeper, Virginia, the County Board of Supervisors, the Culpeper County Department of Parks and Recreation, the Culpeper County School Board, the Town of Culpeper, and all their officers, agents, employees, staff, volunteers and successors.

It is likewise assumed and agreed that the participant will, at his own expense, wear the proper clothing and protective equipment during the activity, and that it is the responsibility of the participant or parent or guardian to make sure the criteria are met. I grant my permission to the county or its agents to transport the participant to and from an event or activity when required and hold harmless those assigned to transport. I also agree to allow transportation of the participant to the nearest physician or hospital for medical treatment and agree to allow for immediate first aid to the injured participant, if and when deemed necessary.

MEDIA RELEASE SECTION: Yes, I understand that I may be photographed and/or videotaped while participating in this activity. I agree to allow Culpeper County Parks & Recreation Department to use said photographs and/or videotapes in Department publications, media campaigns, educational and/or safety purposes, but not for any profit-making activity. I further waive any remuneration for publishing and/or printing such photographs of me. Any concerns may be directed to the County designee-event coordinator/manager for this event. This form will not be accepted until concerns resolved in writing as to this section.

I understand that by affixing my signature on this Agreement, titled Assumption of Risk, Release from Liability, & Covenant Not to Sue, that I attest to having read, fully understand and agree to all as set forth above. Covenantor has carefully read the foregoing covenant not to sue and knows and understands the content hereof.

Participant Signature (7yrs & older) **Parent / Guardian Signature** (if participant 17 or younger) _____
Date

Customer Use - Payment Method

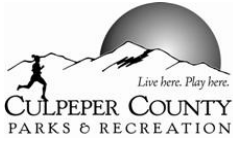
Check Payment Method: Check Enclosed \$ _____ # _____ Cash (Walk-in only)

Credit Card: Visa Master Card American Express Exp. Date ____/____

 Number: _____ / _____ / _____ / _____

Signature: _____

I agree to pay the above total amount according to card issuer agreement



Culpeper Co. Parks & Recreation ActiveNet Customer Account Form

This form is only needed one time; to initially set up your account.

Main contact must be at least 18 years old. PRINT CLEARLY

Main Contact Client #1 Name (Last) _____ (First) _____
 Birth Date ____/____/____ Sex: M F
 Street Address _____ City/State/Zip _____
 Culpeper County Resident? Yes No If yes, Where do you Vote? _____
 Allergies / Special Needs: _____
 Home Phone (_____) _____ Work Phone (_____) _____ Ext. _____
 Cell Phone (_____) _____ Fax Number (_____) _____
 E-mail address _____ (required for confirmations & online registration)

List all immediate family members in household.

Complete shaded areas only if different from Main Contact.

Client #2 Name
 (Last) _____ (First) _____
 Birth Date ____/____/____ Sex: M F
 Allergies / Special Needs: _____

Street Address _____
 City/State/Zip _____
 Culpeper County Resident? Yes No
 If yes, Where do you Vote? _____
 Home Phone (_____) _____
 Work Phone (_____) _____ Ext. _____
 Cell Phone (_____) _____
 Fax Number (_____) _____
 E-mail address _____

Client #3 Name
 (Last) _____ (First) _____
 Birth Date ____/____/____ Sex: M F
 Allergies / Special Needs: _____

Street Address _____
 City/State/Zip _____
 Culpeper County Resident? Yes No
 If yes, Where do you Vote? _____
 Home Phone (_____) _____
 Work Phone (_____) _____ Ext. _____
 Cell Phone (_____) _____
 Fax Number (_____) _____
 E-mail address _____

Client #4 Name
 (Last) _____ (First) _____
 Birth Date ____/____/____ Sex: M F
 Allergies / Special Needs: _____

Street Address _____
 City/State/Zip _____
 Culpeper County Resident? Yes No
 If yes, Where do you Vote? _____
 Home Phone (_____) _____
 Work Phone (_____) _____ Ext. _____
 Cell Phone (_____) _____
 Fax Number (_____) _____
 E-mail address _____

*******REQUIRED*******

Emergency Contact #1 (Not Main Contact)
 Name (Last) _____ (First) _____
 Relationship _____
 Phone (_____) _____

Emergency Contact #2 (Not Main Contact)
 Name (Last) _____ (First) _____
 Relationship _____
 Phone (_____) _____

If more than 4 members in your household, please use another sheet of paper.

Definition:
 Client #1 = Parent / Adult
 Client #2 - #4 = children, spouses, and other adults in household