Community Education Course Registration Form

Name of Student: ____________________________
(First) (Last)

Address: ______________________________________

City: ___________________ State: _______ Zip: ________

Phone: ___________________ E-mail: ___________________

Course Information:

<table>
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<tr>
<th>Course Name</th>
<th>Date(s)</th>
<th>Day(s) of Week</th>
<th>Time</th>
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Course Fee
(Additional supply fees may be collected by the instructor)

Parent/Guardian Consent for students under 18 years of age:

I give consent for my son/daughter, ____________________________, to participate in the community education course listed above.

Parent/Guardian Name (print) ____________________________ Phone ___________________

Signature ____________________________ Date __________________

Payment Information:

Total Course Fees: $ ____________________ □ Cash ________ □ Check #: __________

CREDIT CARD: Visa /MC # ________________________ Expiration Date: __________

Security code on back of card (3-digit #) ______________

Signature: _______________________________________

Submit Completed Form and Payment to:

FRC Student Services
570 Golden Eagle Avenue
Quincy, CA 95971
Fax: 530-283-3757

Revised: 9/20/17
FEATHER RIVER COMMUNITY COLLEGE DISTRICT
570 Golden Eagle Avenue, Quincy, CA 95971

Community Education Course
Waiver of Liability, Assumption of Risk & Indemnity Agreement

Waiver: In consideration of being permitted to participate in any way in:

hereinafter called “The Activity”, I, for myself, my heirs, personal representative or assigns, do hereby release, waive, discharge, and covenant not to sue the Feather River Community College District, its officers, employees, and agents from liability from any and all claims including the negligence of the Feather River Community College District, its officers, employees and agents, resulting in personal injury, accidents, or illnesses (including death) and property loss arising from, but not limited to, participation in the Activity.

Assumption of Risks: Participation in The Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains; 2) major injuries such as eye injury or loss of sight, lacerations, joint or back injuries, heart attacks, and concussions; 3) catastrophic injuries including paralysis and death.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in The Activity. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

Indemnification and Hold Harmless: I also agree to INDEMNIFY AND HOLD the Feather River Community College District HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney’s fees brought as a result of my involvement in The Activity and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Photographic Release: I do hereby grant and convey unto the Feather River Community College District all right, title and interest in any and all photographic images and video or audio recordings made by the Feather River Community College District during my participation in The Activity, including, but not limited to, any royalties, proceeds or other benefits derived from such photographs of recordings.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Signature of Participant __________________________ Print Name of Participant _______________________ Date _______ Age (If Minor) ______

Signature of Parent/Guardian of Participant If Minor __________________________ Print Name of Parent/Guardian of Participant If Minor _______________________ Date _______