Check here to be excluded from marketing email communications from the City of Largo

City of Largo Household Application Non-Transferable

PLEASE PRINT

Primary Guardian: (H/H	# Ex. Date:)	Additional Household Members:	
F'Name	L'Name	(1) F'Name	L'Name
Address	Lot/Apt#	Birthdate	Gender: M or F
City	St Zip	(2) F'Name	L'Name
Phone. ()_	Type: <u>Cell / Home</u>	Birthdate	Gender: M or F
Birthdate	Gender: M or F	(3) F'Name	L'Name
E-mail		Birthdate	Gender: M or F
		(4) F'Name	L'Name
		Birthdate	Gender: M or F
EMI	ERGENCY CONTACTS: (Someone not listed as a	household member above)	
Name:	Relation to member:	Phone:	Type: Cell / Home
Name:	Relation to member:	Phone:	Type: Cell / Home
Name:	Relation to member:	Phone:	Type: Cell / Home
the City of Largo, and I do he and elected officials from an facilities of the City of Largo. THIS RELEASE INCLUDES EITHER ACTIVE OR PASSI	rm, do hereby assume all risks and hazards incidereby agree to waive, release, absolve, defend any and all claims, damages, losses or injuries of any ARELEASE FOR ANY AND ALL LOSSES OR VE OF THE CITY OF LARGO, ITS EMPLOYEES IGNED OF MY OWN FREE ACT AND WILL.	nd hold harmless the City of Largo, its emp ny kind, resulting from my participation in a INJURIES ARISING OUT OF ANY ACT O	oloyees, officers, agents, volunteers, activities, use of equipment and OR OMISSION OR NEGLIGENCE,
SIGNATURE OF ADULT PARTICIPATION	PANT OR THEIR PARENT/LEGAL GUARDIAN * Date	SIGNATURE OF ADULT PARTICIPANT OR TH	EIR PARENT/LEGAL GUARDIAN * Date
FOR OFFICE USE ONLY:	Term: 6 month 1 year	A	
H/H status: Resident	Non-Resident Non-Member Busi	iness Emp	loyee
FEE Payr	nent: Cash Check#	Charge	
Date: Site	issued: Input by:	Reviewed by:	

FLORIDA STATUTES 744.301

NOTICE TO MINOR CHILD'S PARENT/NATURAL/LEGAL GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT. EVEN IF THE CITY OF LARGO USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM THE CITY OF LARGO IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND THE CITY OF LARGO HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

I, the parent or natural/legal guardian of any child named on this form, do incidental to my child's participation in activities and use of equipment are hereby agree to waive, release, absolve, defend and hold harmless the cagents, volunteers, and elected officials from any and all claims, damage resulting from my child's participation in activities, use of equipment and THIS RELEASE INCLUDES A RELEASE FOR ANY AND ALL LOSSE ANY ACT OR OMISSION OR NEGLIGENCE, EITHER ACTIVE OR PAREMPLOYEES, OFFICERS, AGENTS, VOLUNTEERS, AND ELECTED AND SIGNED OF MY OWN FREE ACT AND WILL.	nd facilities of the City of Largo, and I do City of Largo, its employees, officers, es, losses or injuries of any kind, facilities of the City of Largo. S OR INJURIES ARISING OUT OF SSIVE OF THE CITY OF LARGO, ITS
x	
SIGNATURE OF PARENT/NATURAL/LEGAL GUARDIAN	DATE
x	
PRINT NAME OF PARENT/NATURAL/LEGAL GUARDIAN	DATE
RELATIONSHIP TO MINOR	