



# Participant Permission Form Junior Golf Lessons

Golf Center at Balloon Fiesta Park  
9401 Balloon Museum Dr. NE, Albuquerque, NM 87113  
505-768-6043      cabq.gov/parksandrecreation

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Year of Birth \_\_\_\_\_ Gender: M / F

Home Phone (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Emergency Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

If Participant is Under Age 18:

Parent/Guardian's First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Parent's Email \_\_\_\_\_

Parent/Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

## Registration

Skill Level:  Beginner       Intermediate

Needs Clubs:     Yes       No       Right Handed       Left Handed

- Week One – June 20-22, 9:00-10:30am
- Week Two – July 11-13, 9:00-10:30am
- Week Three – July 18-20, 9:00-10:30am
- Week Four – July 25-27, 9:00-10:30am

## Liability Release Agreement

I am the parent or legal guardian of \_\_\_\_\_ (name of Participant) and I give permission for him/her to participate in the City of Albuquerque's Junior Golf Lessons. I hereby certify that my child is physically and mentally capable of participating in the Junior Golf Lessons. In consideration for my child being allowed to participate in the Junior Golf Lessons, I acknowledge, understand, and agree to the following:

I hereby forever release, discharge, and hold harmless the City of Albuquerque, its employees, any staff or volunteers associated with the City's Junior Golf Lessons or the City owned Golf and Event Center at the Balloon Fiesta Park from any and all claims, demands, lawsuits, expenses or charges whatsoever kind which may hereafter accrue or result from any injuries whatsoever, from my child's participation in the Junior Golf Lessons.

I fully understand that athletic activities involve risk. These risks and dangers may be caused by my child's own actions or interactions or by his/her own negligence, the actions or interactions of others participating in the activity, the condition in which the activity takes place. There may be other risks and social and economic losses either not known to me or not readily foreseeable at this time, and I fully accept and assume all such risks and responsibility for losses, cost, and damages I incur as a result of my child's participation in the activity.

Participant Signature if 18 or older – Parent or Legal Guardian Signature if Participant is Under Age 18:

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Photo Release Agreement (Minor under 18 years of age)

*Optional*

I hereby grant to the City of Albuquerque, and to its employees, agents and assigns, the right to photograph my dependent and use the photo and or other digital reproduction of him/her or other reproduction of his/her physical likeness for publication processes, whether electronic, print, digital or electronic publishing via the Internet, including advertising sponsorships as still photographs, transparencies, vehicle wraps, motion picture film and video tape for use on television, or in other printed and graphic materials. I agree to release and hold harmless the City of Albuquerque from any liability or claims with regard to the City's use of my dependent's photograph or likeness. I understand and agree that no monies or other consideration will be paid to me, or any personal expenses incurred by me, for my voluntary consent for my dependent to be photographed.

\_\_\_\_\_  
Child's Printed Name

I certify that I am a parent or legal guardian and have the aforementioned rights to assign and to consent to this Photo Release Agreement.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date