



# HYPED FOR HIKES

WITH THE DISC!

Tuesdays and Thursdays, weather permitting. 6 week walking/hiking group, using some of the best trails within the Decatur Park District! Improve cardio endurance while enjoying group camaraderie in an outdoor setting. With fitness stops planned along the way, we'll also use bodyweight and functional training to increase muscle strength.

**MAR. 21 - APR. 27 / TUES. & THURS. / 12 - 12:45 P.M.**

WEEK 1 & 2 FAIRVIEW PARK; PAVILION 1

WEEK 3 & 4 NELSON PARK FITNESS PAVILION

WEEK 5 & 6 SCOVILL ACTIVITY CENTER

**\$39 / \$35 Resident Discount**

**DISC Member - FREE / Drop in fee: \$8**



REGISTER AT THE DISC  
OR CALL 429-3472



# HYPED for HIKES

## Hyped for Hikes Registration Form

Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_

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

Phone \_\_\_\_\_  Male  Female

**Tues & Thurs / March 21 - April 27 / 12 - 12:45 p.m.**

Code: 441213-07

Check one:  Cash  Check  Credit Card Amount Paid \_\_\_\_\_

Visa/Mastercard/Discover/Am. Express # \_\_\_\_\_

Signature \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV# \_\_\_\_\_

Email \_\_\_\_\_

Would you like to be added to the Park District's mailing list?  Yes  No \_\_\_\_\_

### Please sign waiver below

In accordance with the Americans with Disabilities Act, does registrant require any special accommodations or assistance for enjoyment of the program?

Yes  No  If yes, please describe: \_\_\_\_\_

PHOTO: I understand that my child/ward or I may be photographed or videotaped while participating in a Decatur Park District program. I give permission for photos and videotapes of my child/ward or me to be used to promote the Park District. Such photos and videotapes will remain the property of the Decatur Park District.

#### WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this program(s), you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program(s) (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program(s), and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program(s) against the Decatur Park District, including its officials, agents, volunteers and employees (hereinafter collectively referred as "Decatur Park District").

I do hereby fully release and forever discharge the Decatur Park District from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with this program/activity.

I have read and fully understand the above waiver and release of all claims and assumption of risk. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect and an original form signature.

Signature \_\_\_\_\_ Date \_\_\_\_\_

(18 years or older or Parent/Guardian)

NOTE: The Decatur Park District does not carry medical or accident insurance for its participants. The cost of such insurance would make programs cost prohibitive. We suggest that you look at your own insurance policy to be sure you are adequately covered. The Park District assumes no responsibility for personal injuries or loss of personal property.