

Allen Park Senior Transportation

REGISTRATION FORM

\$9 per year (Over 90 years, no charge)

PLEASE PRINT OR TYPE

PARTICIPANT _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME PHONE (____) _____ CELL PHONE (____) _____

DATE OF BIRTH: _____

PLEASE NOTE:

**THE SERVICE HAS UP TO ONE HOUR (FROM THE INITIAL PHONE REQUEST)
TO MAKE A RETURN PICK UP.**

WAIVER & RELEASE OF LIABILITY

Participant, by and through and for his/her executors and administrators, heirs, assigns, successors, next-of-kin and personal representative, does hereby jointly and severally, expressly and forever waive, release, discharge and indemnify the City of Allen Park, its elected officials, officers, agents, employees, volunteers, sponsors and representatives, as well as Drivers, (the Releasees hereinunder), from and against any liability for injury to persons or property, including but not limited to illness, death, aggravations of pre-existing conditions, loss of employment or any damages whatsoever, including without limitation, claims, demands, injuries or damages resulting from acts or omissions, or acts of passive negligence, on the part of its City, and its representatives, which may result or arise from Participant's participation in the program.

AGREED TO THIS _____ DAY OF _____, 20 ____

NAME (PRINT) _____

SIGNATURE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE (____) _____

EMERGENCY CONTACT: (REQUIRED)

NAME _____ PHONE # _____

RETURN TO:
PARKS & RECREATION CENTER
15800 WHITE
ALLEN PARK, MI 48101
(313) 928-0770

OFFICE USE ONLY

DATE RECEIVED:

NEXT EXP. DATE: