

HC TRIPS AND TOURS

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|----------|--------|
| NAME: | DATE: |
| ADDRESS: | TIME: |
| CITY: | STATE: |
| PHONE: | ZIP: |
| | EMAIL: |

| | |
|----------------|--------------------------------------|
| | <u>CIRCLE ONE</u> |
| TRIP NAME: | Deposit OR Full amount |
| Traveler Name: | |
| Traveler Name: | |
| Note: | <i>Total due today for this trip</i> |

| | |
|----------------|--------------------------------------|
| | Deposit OR Full amount |
| TRIP NAME: | Deposit OR Full amount |
| Traveler Name: | |
| Traveler Name: | |
| Note: | <i>Total due today for this trip</i> |

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|----------------|--------------------------------------|
| | Deposit OR Full amount |
| TRIP NAME: | Deposit OR Full amount |
| Traveler Name: | |
| Traveler Name: | |
| Note: | <i>Total due today for this trip</i> |

| | |
|----------------|--------------------------------------|
| | Deposit OR Full amount |
| TRIP NAME: | Deposit OR Full amount |
| Traveler Name: | |
| Traveler Name: | |
| Note: | <i>Total due today for this trip</i> |

| | |
|----------------|--------------------------------------|
| | Deposit OR Full amount |
| TRIP NAME: | Deposit OR Full amount |
| Traveler Name: | |
| Traveler Name: | |
| Note: | <i>Total due today for this trip</i> |

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|---|--|
| <i>Total included with this registration Form - Traveler #1</i> | |
| <i>Total included with this registration Form - Traveler #2</i> | |

*See back page for waiver, signature and payment information

HC TRIPS AND TOURS

***THIS WAIVER MUST BE SIGNED BEFORE TRIPS CAN BE BOOKED**

RELEASE OF LIABILITY: I/We waive all rights and release all claims that might be held against the City of Yakima, The Harman Center, the Parks and Recreation Division, its hired or contracted instructors or volunteers, and their employees and agents for any and all illnesses, injuries or losses which may be suffered because of my/our participation in the activities offered by the City of Yakima Parks and Recreation Division. To the best of my/our knowledge, I/we have no physical or other conditions which would interfere with my/our participation.

Signature : _____ Traveler #1
Date: _____

Signature : _____ Traveler #2
Date: _____

Travel #1

| | |
|--|---------------------------------|
| CREDIT CARD INFORMATION: V MC DISC AEX (circle one) | or CHECK #: |
| Name on Card: | |
| Card #: | Exp. Date: / cvc# |

Travel #2

| | |
|--|---------------------------------|
| CREDIT CARD INFORMATION: V MC DISC AEX (circle one) | or CHECK #: |
| Name on Card: | |
| Card #: | Exp. Date: / cvc# |