SPC Outdoor Recreation Activity Form Registration & Agreement

(Trip Location/Activity) _____ Date _____ Trip Cost* _____

Indicate status: ____ Spartanburg County Resident, IN DISTRICT
____ Nonresident or Spartanburg County Resident, OUT OF DISTRICT*
** Residents in the city limits of Campobello, Chesnee, Duncan, Inman, Landrum, & Wellford will need to add 25% of activity cost to total registration fee.*

Name: _____ (Last) _____ (First) _____ (MI) **Male** _____ **Female** _____

Address: _____

Email: _____ **Phone Number** _____

Fitness Level: Excellent Good Average Fair Poor

_____ (Initial) Because activities are usually vigorous in the outdoors, I should expect to engage in active physical participation.

_____ (Initial) I certify that I can swim. Yes No

_____ (Initial) I realize that my payment is non-refundable following the registration deadlines and that all information provided is complete and truthful.

What are your expectations of SPC Outdoor Recreation during this activity? _____

_____

Trip Refunds

SPC Outdoor Recreation reserves the right to cancel a program due to inclement weather, natural disasters, or extenuating circumstances. In the event we must cancel a program, a full trip refund will be provided. Should a participant choose to cancel, 50% of the trip cost will be refunded if we are notified of cancellation 14 days prior to the trip's departure date.

Zero Substance Policy

SPC Outdoor Recreation does not permit the use or possession of alcohol or illegal drugs while participating in activities or trips within the program. In signing this document, I am agreeing to abide by this policy while participating in a SPC Outdoor Recreation sponsored activity. Anyone using illegal drugs or alcohol will be immediately removed from the trip or activity. I understand that should I be removed from a trip or activity, I will be held responsible for all costs (which may be substantial, including additional airfare, taxis, etc.) incurred during my return to Spartanburg.

Other Policies

All photographs taken by staff during the event will become property of Spartanburg Parks Commission and may be used for subsequent publicity without your consent. Please let us know if you do not wish to be photographed.
All participants must show proof of health insurance. Health insurance for trips is not availble for purchase from SPC.
Pets are not allowed during programs.

_____

Signature **Date**

OFFICE USE

Date Completed **Amount Paid**

Health Info Form _____ **Cash** _____

Waiver/Release _____ **Check #** _____