



Health & Wellness Series

Registration Form

Participant Name: _____ Parent/Guardian Name: _____
(Please print) (Please print)
Address, City State Zip: _____ Phone Number: _____

Emergency Contact

Name: _____ Phone number: _____ Relationship: _____

Waiver: In consideration of gaining access and/or being allowed to participate in the activities and programs at the Glass Recreation Center, and to use its facilities, equipment and machinery, I do hereby waive, release and forever discharge the City of Tyler, its employees, representatives, executors and all others from any responsibility or liability for injuries or damages resulting from my participation at said facility. I do also hereby release all those mentioned and any others acting on their behalf from any responsibility or liability for any injury or damage to myself, including those caused by the negligent act or omission of any of those mentioned or others, acting on their behalf or in any way arising out of or connected with my participation in any activities of the Glass Recreation Center. I agree to adhere to all policies set by the Glass Recreation Center.

Promotion: I hereby give consent to the said department to photograph myself. I understand the picture may be included in program scrapbook, and/or in the promotion of Tyler Parks and Recreation Department Health and Wellness Series in the newspaper, slide shows or other media.

Signature: _____ Date: _____

Please check each class you would like to register for:

Classes held at Glass Recreation Center, 501 W. 32nd

- ☐ Walk N' Talk: Mondays, Wednesdays & Fridays, April 2 - May 21, from 9 to 10 a.m.
- ☐ Master of Memory: Fridays, April 2 - May 7 from 11 a.m.to Noon
- ☐ Get the Facts: Mondays, April 5 – April 26 from 11 a.m. to Noon
- ☐ A Fresh Start to A Healthier You: Wednesdays, April 7 – April 28 from 11 a.m. to Noon
- ☐ World Health Observances: 2nd and 4th Thursdays of the Month from 1 to 2 p.m.