

HUNTER EDUCATION

Please pre-register at Riverton Parks & Recreation, 12830 S Redwood Rd, Phone: (801) 208-3101
Office Hours: M-TH, 8 am-6 pm, F 8 am-5 pm, *make checks payable to RIVERTON CITY

Space is limited, please register early!



Students must attend all 6 classes and **shooting exam. Parent or guardian must register students 18 years & under.

Cost: \$2 + **\$10 Hunter Education Voucher
Ages: All Ages
Days: Wednesday & Fridays
Dates: January 12, 14, 19, 21, 26, 28
Time: 6:00-9:00 pm
Location: Sandra N. Lloyd Community Center
Room S109, 12830 S Redwood Road

***A Hunter Education Voucher is required the first night of class. You will not be allowed to participate in the class without one. They can be purchased at any location that sells hunting and fishing licenses. The cost is \$10 and includes a small game license upon completion of the course.*

***The shooting exam usually takes place the 2nd Saturday, the instructor will confirm the date the first night of class.*

Hunter Education - January '11

Participant's Name _____ Birthdate _____ Age _____

Address _____ City _____ Zip _____

Parent/Guardian Name _____ Phone (H) _____ (C) _____

Email _____

Please read and sign **MEDICAL CONSENT & RELEASE OF LIABILITY** to complete registration.

As a participant or parent/guardian of the participant, I hereby consent that I/he/she may participate in Riverton Parks and Recreation Programs and I hereby state that the information contained herein is true and complete.

- RELEASE, INDEMNITY, TRANSPORTATION.** Recognizing the possibility of physical injury associated with participation in Riverton Parks and Recreation Programs, I hereby release and agree to hold harmless and indemnify Riverton City, associated organizations and personnel from and against any claims by or on behalf of the participant for any damage against any claim by or on behalf of the participant for any damage or injury he/she or I may suffer including legal fees, as a result of his/her or my participation in the program, including transportation to and from activities.
- EMERGENCY MEDICAL CARE.** I hereby give my consent for emergency medical treatment by Riverton City, its employees, agents or health care provider(s) designated by them, in accordance with their best judgment.
- INSURANCE.** I understand that I should have health and accident insurance to cover injuries arising from participation in the program(s).
- REFUND POLICY.** 1) \$10 of each registration fee is non-refundable to cover city administrative costs. Exception: in the case of a program cancellation participants will receive a full refund. 2) All participants requesting a refund must submit a written refund request to the Program Coordinator explaining why they are withdrawing from the program, participant's name, program name as well as name and address of person receiving the refund. In order to receive a refund the request must be received before the first class, lesson or game. If request is not received before the first class, lesson or game, no refund will be given. However, medical conditions or other special circumstances will be handled on an individual basis. 3) Refunds will not be given nor will fees be prorated based on missed classes, lessons or for missed, forfeited or games cancelled due to weather.

Signature _____ **Date** _____