

Registration Form

Please fill out form completely and print clearly! Please include a current e-mail address.

Participant's Last Name _____ Parent's Full Name _____

Address _____ Apt.# _____ City _____ Zip _____

Primary Phone # _____ Mobile Phone Carrier _____ E-mail _____

PARTICIPANT'S FIRST NAME	M/F	BIRTH DATE	ACTIVITY CODE/ 1ST CHOICE	ACTIVITY CODE/ 2ND CHOICE	FEE

I wish to make a donation to the Support Our Kids (SOK) Fund (Please indicate amount): \$ _____

Do participants live within New Haven Unified School District? (Circle one): Yes No

I hereby authorize the use of my credit card: Type of card (Circle one): Master Card Visa Discover Card
(We do not accept American Express)

Please provide all of the following information if you are paying by credit card. If you do not fill it out completely, we may not be able to register the participant in the program you are trying to register for. If you have any questions, please contact any of our centers.

Name on Card _____ Card number _____ Expiration date _____ (CID) Number _____

Billing Address (If different from above) _____ City _____ State _____ Zip Code _____

I the undersigned, agree to indemnify and hold harmless the City of Union City from any loss or liability which is alleged to have resulted from my participation in this program. I have read and understand the activity description listed in the Union City Community & Recreation Services Department Activity Guide, and I comprehend all the risks involved by participating in that activity. I hereby give my dependents permission to participate in the activities indicated and absolve the City of Union City, its employees, volunteers, contractors and officers from liability. I also grant full permission to any and all of the foregoing to use my name and any photographs, videos, motion pictures or recordings for any publicity and promotion purposes without obligation or liability to me. I understand that no refunds or transfers will be given on or after the first class.

Signature _____ Date _____ Parent • Guardian • Participant
Please Circle One

Does the participant or parent/ guardian have any special needs that may require specific accommodations to fully enjoy one of our classes or facilities?
 NO YES, I have special needs that might require special accommodations. Please call 675-5495 for more information.

For Office Use Only Processed By _____ Date _____
 Cash Check # _____ Credit Card _____ Used Credit Class _____

Registration Dates

Summer Activity Guide 2017

- UC Resident Online Registration starts:
Monday, April 17, 2017
- All Registration (mail-in, walk-in, fax for residents and nonresidents)
Monday, April 24, 2017
- Summer Classes
June 12–August 27 (11 weeks)

Holidays/Notable Dates

- Tuesday, July 4 (Independence Day)
- Monday, September 4 (Labor Day)

Community Center offices will be closed on these days.

Register online at www.UnionCity.org, or:

Mail to:

Union City Community and Recreation Services Registration
34009 Alvarado-Niles Rd., Union City, CA 94587
(No walk-in registration will be accepted at this address.)

Fax:

Please fax to only ONE (1) Community Center

Holly Community Center • 510.471.6878
hollycenter@unioncity.org

Kennedy Community Center (at 10th Street) • 510.429.6730
kennedycenter@unioncity.org

Ruggieri Senior Center • 510.477.0317
ruggieriseniorcenter@unioncity.org

Mark Green Sports Center • 510.489.8620
ucsportscenter@unioncity.org

Create a Rec1 (New Registration Site) account at:

<https://secure.rec1.com/CA/union-city-community-and-recreation-services/>