

FOR OFFICE USE ONLY:			
Payment Received?	YES NO	Form Signed?	YES NO
Total Fees Paid:	_____	Transaction #:	_____
Mailed Confirmation?	YES NO	Staff Initial:	_____

Mail-In Registration

Fill out this form, complete credit card information below or enclose a check or money order for the proper amount made payable to **Center Activities**, and mail to:

Center Activities
Humboldt State University
Arcata, CA 95521

Mail-in registration will be accepted on a first-come, first-served basis. Register early to ensure space. Reservations will not be accepted without full payment of class fees. Please call two days prior to class starting date to verify enrollment and class status: **(707) 826-3357**

PARTICIPANT NAME _____ PHONE _____
 ADDRESS _____ CITY _____ STATE _____ ZIP _____
 EMAIL _____

CLASS TITLE _____	SESSION _____	FEE _____
CLASS TITLE _____	SESSION _____	FEE _____
CLASS TITLE _____	SESSION _____	FEE _____
CLASS TITLE _____	SESSION _____	FEE _____
		TOTAL FEES _____

CANCELLATION AND REFUND POLICY

A. We reserve the right to cancel or modify any activity due to inclement weather, insufficient participation or other conditions beyond our control. In the event that Center Activities cancels an activity, all fees collected are fully refundable or fully transferable. Should any participant cancel a class, trip, or outing of their own volition, the following guidelines are applicable. Refunds will not be given outside these guidelines except in rare situations and then only with the approval of the Center Activities Manager. This policy is necessary to ensure proper student / instructor ratios, the highest quality programs, and to secure the lowest prices from the agencies with which we work.

INITIAL: _____

B. Courses facilitated by outside agencies, such as the Wilderness First Responder/First Aid are subject to different refund and cancellation policies from Center Activities. Customers registering for such courses will be notified of such policies by Center Activities.

INITIAL: _____

C. For courses that meet four or fewer times (including outdoor excursions that have a pre-trip meeting), no refunds or transfers/account credits will be given within seven days prior to the beginning of the activity. Refund requests more than seven days prior to an activity will be assessed a 25% or \$10 fee, whichever is greater. A fee may only be transferred one time. There are no refunds made after the initial transfer is done.

INITIAL: _____

D. For courses that meet five or more times, a full refund will be issued if the participant withdraws prior to the second class meeting. No refunds or transfers/account credits will be issued after the second class meeting.

INITIAL: _____

PAYMENT METHOD (credit card, check, or money order) Payment in full must accompany registration. Do not send cash with mailed registrations. If using a check you must include your license and expiration date.

CHECK OR MONEY ORDER License/ID# : _____ Exp Date : _____

VISA MASTERCARD DISCOVER AMERICAN EXPRESS

Credit Card# : _____ Exp Date : _____

I agree to pay the total fees as stated above. CARDHOLDER FULL NAME (please print) : _____

CARDHOLDER SIGNATURE : _____ DATE : _____

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RELEASE, WAIVER OF LIABILITY, INDEMNITY AGREEMENT AND MEDICAL RELEASE

I am aware that during the outing, trip, class, instruction, or other activity in which I am enrolling through the University Center, Center Activities Program I will be exposed to certain risks and hazards. I am aware that these risks and hazards may result in property damage, personal injury or death.

In consideration of being permitted to enroll in and participate in the outing, class instruction or other activity, I agree to the following:

1. I hereby release, waive, discharge and covenant not to sue the State of California, the Trustees of the California State University, Humboldt State University, Humboldt State University Center, Center Activities Program, their directors, officers, employees and agents (hereinafter, referred to as "Releases") from all liability to me, my personal representatives, assigns, heirs and next of kin for any loss or damage in any claim or demands therefore, on account of property damage, personal injury or death, whether caused by the negligence of the Releases or otherwise, arising out of the outing, trip, class, instruction or other activity.
2. I agree to indemnify, save and hold harmless the Releases and each of them from any loss, liability, damage or cost that they may incur due to my enrollment or participation in the outing, trip, class, instruction or other activity whether caused by the negligence of the Releases or otherwise.
3. I hereby assume full responsibility and risk of bodily injury, death or property damage due to the negligence of Releases or otherwise arising out of the outing, trip, class, instruction or other activity. I understand that there are certain risks and dangers that may occur, including but not limited to: the hazards of traveling in mountainous terrain; the hazards of aquatic activities; exposure to personal injury; accident or illness in remote places without medical facilities; forces of nature; and travel by air, train, boat, automobile or other conveyance.
4. I further expressly agree that the foregoing Release, Waiver and Indemnity Agreement is intended to be as broad and is inclusive as is permitted by the laws of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, continue in full legal force and effect.
5. I have read and voluntarily signed the Release, Waiver of Liability and Indemnity Agreement and further agree that no oral representation, statement or inducements not contained in this document have been made.
6. I agree that while participating in this activity I agree to conform to all policies of the Center Activities Program, and to abide by all state and federal laws. I also agree to accept and follow the directions of the outing or activity leader(s) or instructor(s) and to act in a mature and responsible manner. I further agree to follow all wilderness regulations and ethics, and to adhere to any lodging or campground requirements or precepts. I agree not to leave the group unless first notifying the outing or activity leader. I understand that upon leaving the group, I waive all rights as an outing or activity participant.
7. I hereby grant permission for the performance of any emergency medical treatment that may be required in the case of an accident wherein I am rendered unconscious or unable to approve of the required medical treatment. I hereby hold harmless and agree to indemnify the Releases from any claims, causes of actions, damages and/or liabilities arising out of or resulting from said medical treatment. In the event that I become the victim of an accident I will hold harmless from any liability or negligent actions which may arise in connection with the search and rescue, stabilization, evacuation, transportation, and emergency care I receive while secondary aid resources are being sought.
8. I hereby agree to permit University Center, Center Activities Program's employees, agents and other guests to take photographs and make film records of the trip without further recourse. I understand and agree that such photographs and/or film records may be used for commercial and/or promotional purposes.
9. I hereby agree that California law will apply to any legal actions for personal injury, property damage or death arising out of any outing, trips, classes, instructions or other activities in which I am enrolling through the University Center, Center Activities Program. I further agree that California is the proper forum in which to file any legal action arising out of any activity in which I am enrolling. I agree to attempt to settle any dispute (that cannot be settled by discussion) through mediation before a mutually acceptable mediator.
10. I hereby acknowledge that this agreement shall be governed by and construed in accordance with California law and each party hereby irrevocably submits to the exclusive jurisdiction and service of process of the California courts. I further acknowledge that this agreement was entered into in Humboldt County, California and all legal actions arising from this agreement shall be filed in the courts of Humboldt County.

PARTICIPANT SIGNATURE : _____ **DATE :** _____

SIGNATURE OF PARENT (if applicant is a minor) : _____

Must have a person listed to notify in the event of an emergency, should you be rendered unable. Contact must be someone who is not attending the same class.

IN CASE OF EMERGENCY CONTACT : _____

PHONE : _____ **RELATIONSHIP :** _____

Write below or attach a list naming any **ALLERGIES** and any special **MEDICAL CONSIDERATIONS** that may affect your ability to participate in the activity for which you are registering. Please also list any **MEDICATION** you are currently taking, or that you will have with you during the activity. Please give all pertinent details. This information is **CONFIDENTIAL**.