Registration Information and Form

FIRST DAY OF REGISTRATION

Saturday, August 28
from 8-10 am at Stoneman School

San Marino residents only (please bring identification with your address, or a utility bill).

YOU MAY ONLY REGISTER YOUR IMMEDIATE FAMILY MEMBERS ON THIS DATE.
Proxy registration CANNOT be accepted for this registration date (only).

WALK-IN REGISTRATION

RESIDENTS: Monday, August 30
NON-RESIDENTS: Tuesday, August 31

You may bring your registration form and payment to the Recreation Division located at 1560 Pasqualito Drive (Stoneman School), between the hours of 8 am and 5 pm, Monday through Thursday. A proxy may submit registration and payment.

MAIL-IN REGISTRATION

Mail-in registration received prior to Saturday, August 28 - First Day of Registration - will not be registered until Monday, August 30 (residents) or Tuesday, August 31 (non-residents).

Simply fill out a registration form along with a check payable to "City of San Marino" for class fees (*enclose separate checks for lab fees*) and *mail to: City of San Marino Recreation Division, 2200 Huntington Drive, San Marino, CA 91108.*

ONLINE REGISTRATION

BEGINS Tuesday, August 31*

Click on the link on our webpage at www.cityofsanmarino.org/recreation or go directly to our registration site at https://registration.sanmarinorec.org. A $2 convenience fee will apply.

If you have not taken a class with us recently you can go online now to create an account.

**Residents, please note that Resident Walk-in Registration begins on August 28.*

RECREATION DIVISION GENERAL INFORMATION:

OFFICE HOURS: Monday through Thursday, 8 am-5 pm **TELEPHONE:** (626) 403-2200 **LOCATION:**1560 Pasqualito Drive at Stoneman School
PRORATING: You can join a class at any time, but we *CANNOT* prorate fees for any of our programs. **NON-RESIDENT FEE:** If you do not live or work in San Marino, or do not attend a San Marino public school, you are required to pay a non-resident fee of $25 per year per participant.
REFUNDS: Any activities cancelled by the Recreation Division will automatically result in a full refund. The San Marino Recreation Division strives to provide quality programming. ***If a refund or transfer is necessary, please submit your request to Recreation BEFORE the first class meeting.*** Refund checks are issued approximately two weeks following the approval of refund requests. There is a 20% administrative charge per class for refund requests.
RETURNED ITEM FEE: $25 or the maximum amount allowed by law.

CITY OF SAN MARINO - REGISTRATION FORM

RECREATION DIVISION, 2200 HUNTINGTON DRIVE, SAN MARINO, CA 91108 (626) 403-2200

Receipt #:
Processed by:

ADULT NAME	LAST	FIRST	E-MAIL	
	ADDRESS	CITY		ZIP CODE
PHONE NUMBERS	HOME ( )	WORK ( )	EMERGENCY ( ) OR CHECK ONE: ☐ HOME ☐ WORK ☐ CELL	CELL ( )
SCHOOL ATTENDING: (PLEASE NOTE PARTICIPANT)		ALLERGY INFO/SPECIAL ACCOMMODATIONS: (PLEASE NOTE PARTICIPANT)		

PARTICIPANT'S NAME: LAST	FIRST	BIRTHDATE	SEX	ACTIVITY NUMBER	SECTION	ACTIVITY NAME	FEE	✓LAB FEE IF APPLICABLE
								☐ $
								☐ $
								☐ $
								☐ $
								☐ $
								☐ $

☐ CASH *Walk in ONLY*
☐ CHECK # *Payable to: City of San Marino*
☐ CREDIT *Visa, Mastercard, or Discover*

ANNUAL NON-RESIDENT FEE ☐ Please add $25 per participant to my registration fees because I do not live or work in San Marino or the District — $

TOTAL FEES DUE — $

Payable to Instructor
Seperate Check/Cash
DO NOT MAIL CASH
THANK YOU!

I absolve and agree to hold harmless the City of San Marino, its employees, officers or agents from any liability which may result from my participation or that of any minor in my legal custody in the above activity. I give permission for his/her participation in the above activity, and for any necessary emergency medical treatment. Occasionally, we use images of recreation participants for promotional purposes in City-related media, which means that you could be our next superstar! By signing up for a class or activity, you are granting the City of San Marino permission to use your and/or your child's photograph or likeness, or that of a pet or personal property.

Signature of Release of Liability _____ Date

☐ VISA ☐ MASTERCARD ☐ DISCOVER

																____/____ Exp. Date

Cardholder Signature _____ Billing Zip Code _____