

Registration Application

Customer Service Centre
301 Burnhamthorpe Road W., Ground Floor,
MISSISSAUGA ON L5B 3Y3
Tel: 905-615-4100 Fax: 905-615-4101
or visit www.mississauga.ca/recreation

Office Use Only



The Recreation Division invites persons with disabilities to become involved in general programs. Participants should assess the programs that fit their interests and abilities. If a participant requires support in order to participate, a support person will be admitted to the program at no charge.

Personal information on this form is collected under the authority of Section 11 of the Municipal Act, 2001, S.O. 2001, c.25 and will be used for the purpose of program registration, payment, mailings, and the rental of City facilities. Questions about this collection should be directed to: Manager, Customer Service Centre, at 905-615-4100.

MAIN CONTACT (must be 18 yrs of age or older)

Email address (receipt will be sent via email) New customer
 Updating existing information

Last Name (required information) First Name (required information) Male
 Female

Home phone (required information) Cell phone Business phone Extension

Address Street No. Street Name Suite/Apartment/Unit

City Other City Province Postal Code Adult 65+

Mississauga Ontario

AUTHORIZATION (unsigned forms will delay processing which may result in the loss of requested program)

GENERAL AUTHORIZATION
As used herein, "Program" includes the Program(s) identified herein and any Program/Course that a Participant's Registration is transferred to. The terms herein shall apply to any Transfer/Withdrawal request of a Participant and such Transfer/Withdrawal request shall form part of this Registration Application.

treatment of any participant, including hospitalization and transportation, and to the administration of such medical treatment, all as may be deemed necessary by the city in the circumstances. Each participant is responsible for his/her own medical coverage and the costs associated therewith.

at the facility at which the Program is provided;
2. To freely accept and fully assume all such risks, including the possibility of personal injury, death, property damage, expense and related loss, resulting from (a) the Program(s); and/or (b) my and/or any participant's (i) participation in the Program(s); and/or (ii) attendance at the facility at which the Program is provided; and
3. To forever indemnify, defend and hold harmless the indemnitees from and against any and all claims incurred by the indemnitees arising out of or related to (a) any act or omission by me and/or any participant, any of our invitees and/or anyone for whom in law each is responsible; (b) my and/or any participant's (i) participation in the Program(s); and/or (ii) attendance at the facility at which the program is provided.

I am at least 18 years of age and one of the following:
1. The sole Participant in the Program(s) and agree to the terms set out herein;
2. A Participant in the Program and the parent or legal guardian of the other Participant(s) and have the legal authority to register the other Participant(s) into the Program(s) and bind myself and the other Participant(s) to the terms set out herein; or
3. Not a Participant in the Program but the parent or legal guardian of the Participant(s) and have the legal authority to register the Participant(s) into the Program(s) and bind myself and the Participant(s) to the terms set out herein.

WAIVER OF LIABILITY
I hereby agree to the following:
1. To waive and forever release the city, its elected officials, employees, agents, contractors and volunteers ("indemnitees") from any and all claims, demands, actions, damages (including direct, indirect, special and/or consequential), losses, actions, judgments, and costs (including legal fees) (collectively, "claims") howsoever arising, whether known or not now known or anticipated, but which may later develop or be discovered, including all of the effects and consequences thereof, which may have been or may hereafter be sustained by me or any participant or my or any participant's successors, heirs, executors, administrators, assigns, servants or agents, or any of them, arising out of or in connection with (a) the Program(s); and/or (b) my and/or any participant's (i) participation in the Program(s) and/or (ii) attendance

I have read and understood the Medical Authorization and Waiver of Liability.

MAIN CONTACT'S SIGNATURE (Required)

METHOD OF PAYMENT

Cheque (NO post-dated) Make cheques payable to: **CITY OF MISSISSAUGA**
 Cash VISA MasterCard Debit Card American Express
 Scheduled Payments (see *payment terms on back*)

* Non-Residents must include an additional Fee per participant per program

*Total Payment

\$ _____

Card Number Expiry (Month/Year) Home Phone

Cardholder's Name

CARDHOLDER'S SIGNATURE (Required)

PARTICIPANT #1

Last Name: Participant #1 First Name: Participant #1 Sex Male
 Female

Adult If 18 years of age or younger, provide birthdate Business Phone: Participant #1 Home Phone: Participant #1
 65+ Day Month Year

| Course Code | Program Name | Location | Start Date | Time | Initial Payment | *Fee \$ |
|-------------|--------------|----------|------------|------|-----------------|---------|
| 1. | | | | | | |
| 2. | | | | | | |

PARTICIPANT #2

Last Name: Participant #2 First Name: Participant #2 Sex Male
 Female

Adult If 18 years of age or younger, provide birthdate Business Phone: Participant #2 Home Phone: Participant #2
 65+ Day Month Year

| Course Code | Program Name | Location | Start Date | Time | Initial Payment | *Fee \$ |
|-------------|--------------|----------|------------|------|-----------------|---------|
| 1. | | | | | | |
| 2. | | | | | | |

For Program Registration Information Call 905-615-4100

General Information

Registration Deadline

Applications are accepted for most programs at any time and are pro-rated for any class(es) already held.

Waitlist

In the event that the program you selected is full, you will be placed on the waitlist. If a space becomes available, you will be contacted by email.

Age

All participants must meet the age requirement of the program as listed on activemississauga.ca.

Missed Class(es)

In the event that a customer is unable to attend a class(es), the City regrets that makeup class(es) will not be offered.

Taxes

Adult programs are subject to applicable taxes.

Non-Residents

Non-residents must include an additional Fee per person, per program. Non-resident registrations will be processed 10 days after the start of registrations.

Withdrawals, Transfers and Refund Requests

All Withdrawals that are processed by The Corporation of the City of Mississauga (the "City") are subject to an Administration Fee.

Note: In the event that the Participant is Withdrawing themselves or other clients within their account from more than one Program at a time, or withdrawing more than one Membership at one time, the Administration Fee will only apply once per account.

The effective date of the Withdrawal is the date the Transfer/Withdrawal request is received by the City, regardless of the date the participant stopped attending the class, or date on medical note.

Online - Timelines

Program Withdrawals and Transfers must be done up to five (5) calendar days prior to the Program start date on activemississauga.ca.

An Administration Fee will not be charged.

EXCEPTION: Withdrawals from Programs that were paid by scheduled cheque(s) payment must be done by the Customer Service Centre to ensure your cheque(s) are not processed. An Administration Fee applies as Online Withdrawals are not an option.

In Person - Timelines

Transfers between Programs and Program Withdrawals may occur as follows with the amount refunded being the full amount, less the cost of any classes already held. In the case of Withdrawals, an Administration Fee will be charged:

- Five (5) Calendar days or more prior to Program start date for: week-long Camps, Aquatic Leadership Programs with five (5) or less scheduled classes, and Programs/Workshops with three (3) or less scheduled classes (including Museum Tea & Tour).
- Any time before 50% of the Program dates have been held for: Regular Programs not noted above, Aquatic Leadership Programs with six (6) or more scheduled classes and Adult Sports League Team Registrations.

In Person - Process

You may call the Customer Service Centre at 905-615-4100 to Withdraw, or attend one of the following places:

- City of Mississauga, Recreation Division - Customer Service Centre
301 Burnhamthorpe Rd. W.
Mississauga, Ontario L5B 3Y3
- Nearest Community Centre or Swimming Pool

Refund Processing

Allow approximately 4 weeks for processing a refund cheque. Refunds for registrations paid by credit card will appear on your next month's statement.

Program Cancellations

The City may, in its absolute discretion, cancel any program or registration at any time. In the event that a program is cancelled by the City, every effort will be made to accommodate the participant in another program. If there are no other programs which are satisfactory to the participant, a full refund will be provided. No Administration Fee will be charged.

Payment

At the time of registering you have the option of paying in full or using one of the following scheduled payment options. Please indicate on the Registration Application Form that you wish to schedule payments. If you are paying by cheque, please attach a separate cheque for each program, otherwise the total payment will be processed regardless of the number of registrations accepted. Electronic Funds Transfer payments must be made In-Person.

Online activemississauga.ca registrations must be paid by credit card (MasterCard/Visa/American Express) or by using money paid on your City account prior to registrations. Scheduled payments are applicable to Programs that are over \$50.00 and at least 8 weeks in length.

Scheduled Payment Option

(A session is a length of time a program runs)

| Program Session | Initial Payment | Payment Due Dates |
|---|--|---|
| All Year (Sept-June) | \$50.00 | Nov 5, Jan 5, Mar 5, May 5 |
| All Year Culture (Sept-May) | \$300.00 | Oct 20, Nov 20, January 20, February 20, April 20 |
| All Year Recitals (Sept-May) | \$50.00 | Nov 5, Jan 5, March 5 |
| All Season Golf Junior Competitor Prog. (April-Oct) | 50% of course fee | July 1st |
| Fall | 50% of course fee | October 5, Dec 5 |
| Winter | 50% of course fee | February 5, March 5 |
| Spring | 50% of course fee | April 20, May 20 |
| Summer | 50% of course fee | July 20 |
| Week Long July Camps | None | June 1st |
| Week Long August Camps | None | July 1st |
| Adult/Youth Sports League Team Registration | Due in full <u>or</u> initial minimum fixed payment equal to the value of 4 league games. Balance due 15 business days after program start date. | |

Declined Payments

Payments which have not been honoured by the bank must be rectified immediately upon notification by the City. The City reserves the right to cancel the registration or to revoke privileges until full payment is received. An NSF fee may be applied.

Receipts

You will receive an automated reply Receipt confirming the location, start date and time of the program if your e-mail address is currently in our system and a payment was made.

In-Person registrations will receive a Receipt at the time of registration. Activemississauga.ca users can access their receipts by logging into their account.

Note - Receipts will not be mailed.

Please make sure the Receipt is for the program(s) you requested. Contact us if there are any discrepancies or if you do not receive a Receipt prior to the start of the first class at 905-615-4100.

Duplicate Receipts

To print duplicate receipts free of charge (via activemississauga.ca) for registrations that were processed within the past 12 months, your email address must be recorded on your account. All other requests for duplicate receipts must be printed by City of Mississauga staff and an Administration Fee will be charged per request per year.

Consent to Medical Treatment and Waiver of Liability

Refer to the front of the Registration Form for information relating to Consent to Medical Treatment, liability and signature requirements.