



San Geronimo Valley Community Center
and
SGV Community Gym and LOFT
415.488.4118 x 219
hcort@sgvcc.org



SGVCC Mountain Bike Club Indemnification Form 2019-20

Participants Name: _____ Grade: _____ DOB: _____

Parent/ Guardian Name: _____

Mailing Address: _____

Home Phone: _____ Cell Phone 1: _____ Cell Phone 2: _____

Email 1: _____ Email 2: _____

In case parents cannot be reached, please notify:

Name: _____ Phone: _____

Name: _____ Phone: _____

Student's Medical Insurance # _____ Provider _____

Allergies: _____

I give my authorization for my child _____ to receive necessary medical treatment if it should be needed.

Hold Harmless and Indemnification Agreement: The undersigned agrees to defend, indemnify and hold harmless the Lagunitas School District and San Geronimo Valley Community Center, its Board of Trustees, agents and employees, individually and collectively, from all costs, losses, claims, demands, suits, action payments and judgments, including legal and attorney fees, recovered against any of the above that may arise for any reason from or during or alleged to be caused by the undersigned's participation in the voluntary community activity.

Photo Release:

I understand that photos of my child may be used for public relations and I give informed consent for the San Geronimo Valley Community Center to use my child's likeness in its i.e. newspaper, website, brochures, emails etc.

Riding Home Release:

My child _____ has my permission to ride his/her bike home after the Mountain Bike program concludes it's weekly ride. _____ Parent initials

Credit Card/Visa/MC/Other _____ Exp. Date _____ CVC _____

Amount to be charged _____ Check # _____ Check Amt _____

Pay online at sgvcc.org or make checks payable to SGVCC. Memo: Bike Club and mail to: P.O. Box 194, San Geronimo, CA 94963

Parent/Guardian Signature: _____ Date: _____

Office Use: Trimester 1 _____ Trimester 2 _____ Trimester 3 _____