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# Clark County Parks & Recreation



**FOR OFFICE USE ONLY**

HOUSEHOLD # \_\_\_\_\_

## SAFEKEY REGISTRATION FORM - 2020-2021

**This registration form along with proof of payment for the specific day(s), MUST be submitted to your schools Safekey Site staff in person prior to the participants first day of attendance.**

School Site:	Current Grade:	Age:	Date of Birth:
Participant Last, First Name:		Sex:	Male      Female
MEDICATION:      _____ NO      _____ YES (If yes, please complete additional medication form with staff at the Safekey site.)			
ANY ALLERGIES/HEALTH ISSUES:      NO      /      YES _____ (If so, please list): _____			
ANY SPECIAL NEEDS/ACCOMODATI      NO      /      YES: _____			

**If your child has special needs and/or needs assistance to fully and safely participate in the Safekey program, we strongly suggest contacting the Safekey office (702) 455-8251 at least two weeks prior to starting your child in the Safekey program. (Questions please refer to the Safekey Parent Handbook)**

**Note: ONLY one registration form is permitted for each child. (In joint custody situations BOTH GUARDIANS MUST BE LISTED)**

PARENT/GUARDIAN #1		Relationship to participant:	Cell Phone: (    )
Street Address			Home Phone: (    )
City:	State:	Zip:	E-mail Address:
			DATE OF BIRTH:    /    /
PARENT/GUARDIAN #2		Relationship to participant:	Cell Phone: (    )
Street Address (If different from above)			Home Phone: (    )
City:	State:	Zip:	E-mail Address:
			DATE OF BIRTH:    /    /

### EMERGENCY CONTACT / AUTHORIZED ESCORTS TO PICK UP PARTICIPANT (Someone other than parent/guardian):

Name #1	Relationship:	Phone #1:	Phone #2:
Name#2	Relationship:	Phone #1:	Phone #2:
Name#3	Relationship:	Phone #1:	Phone #2:
Name#4	Relationship:	Phone #1:	Phone #2:

I, Print Parent / Guardian #1 / Print Parent / Guardian #2, acting on behalf of myself or my minor child do expressly and forever waive and release Clark County, Nevada, Department of Parks and Recreation and all their respective officers, employees, agents, or representatives from any and all liability for personal injuries or damages sustained, incurred, or arising from participation in any Parks and Recreation activity.

**PHOTO/VIDEO RELEASE:** By registering for any Clark County Parks and Recreation program, I agree to allow publication of photos or video taken of my child/children or myself at any program, event or facility associated with the Clark County Parks and Recreation Department.

Signature of Parent/Guardian #1

Date

Signature of Parent/Guardian #2

Date

**DISCLAIMER: By typing your name above, you are signing this application electronically**



**Clark County Board of Commissioners**  
 MARILYN KIRKPATRICK, Chairman • JAMES B. GIBSON, Vice-Chairman  
 JUSTIN JONES • ROSS MILLER  
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 YOLANDA T. KING, County Manager



ClarkCountyNV.Gov/parks  
 ccparks@ClarkCountyNV.gov



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HOUSEHOLD # \_\_\_\_\_

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School Site:	Participant Last, First Name:
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**SAFEKEY PROGRAM WAIVERS - PLEASE INITIAL EACH WAIVER BELOW**

**FEES:** I understand that Safekey is a **PRE-PAY program** for grades K-5 at Clark County zoned elementary schools and grades 6-8 at select middle schools. Payment for specific date am/pm sessions **MUST** be made prior to participation in the program and are not interchangeable. Participants not paid in advance will be escorted to the school office. Spots are limited and are on a first-come-first-served basis.

\_\_\_\_\_(Parent/Guardian #1 Initial) \_\_\_\_\_(Parent/Guardian #2 Initial)

**Availability:** Spots are limited and on a first-come-first-serve basis.

\_\_\_\_\_(Parent/Guardian #1 Initial) \_\_\_\_\_(Parent/Guardian #2 Initial)

**Late Pick Up Fee:** I understand that a \$5 late pick up fee will be assessed, **per child**, for every ten (10) minute increment beginning @ 6:01pm until the participant(s) is picked up. After the 3rd occurrence of picking up late, the Safekey program may no longer be available for use. i.e. 6:01pm =\$5, 6:11pm =\$10, 6:21pm = \$15, etc.

\_\_\_\_\_(Parent/Guardian #1 Initial) \_\_\_\_\_(Parent/Guardian #2 Initial)

**Credits/Refunds:** I understand that **NO CREDITS OR REFUNDS** will be issued for the remainder of the school year.

\_\_\_\_\_(Parent/Guardian #1 Initial) \_\_\_\_\_(Parent/Guardian #2 Initial)

**Sign-In/Out:** I understand that each child must be signed in and/or out daily. The only person(s) authorized to pick up the participant are those individuals listed on this form, and they must provide a current (up to date) photo ID. EXCEPTION: State law prohibits staff from withholding a child from an individual who provides tangible proof that he/she/they is the biological parent or legal guardian, unless court ordered documents have been provided.

\_\_\_\_\_(Parent/Guardian #1 Initial) \_\_\_\_\_(Parent/Guardian #2 Initial)

**Custody Issues:** I understand that if custodial issues are in dispute, causing any uncertainty or disruption to our staff or program, the Department expects them to be resolved immediately. If the issue is not resolved immediately, your child may not be able to continue to participate in Safekey.

\_\_\_\_\_(Parent/Guardian #1 Initial) \_\_\_\_\_(Parent/Guardian #2 Initial)

**Child Care Assistance:** I understand that it is my responsibility to provide Urban League Certificates to the Safekey Administration Office via email (CCSafekeyUL@ClarkCountyNV.Gov) **prior** to utilizing the Safekey program. Renewal certificates must be submitted via email (CCSafekeyUL@ClarkCountyNV.Gov) **prior** to the expiration date. I agree to pay for any charges unpaid by Urban League.

\_\_\_\_\_(Parent/Guardian #1 Initial) \_\_\_\_\_(Parent/Guardian #2 Initial)

**Registration Form Updates:** I understand that the only person(s) authorized to make changes to this form are the Parent/Guardian(s) who have completed this form and signed below.

\_\_\_\_\_(Parent/Guardian #1 Initial) \_\_\_\_\_(Parent/Guardian #2 Initial)

**Patron/Participant code of conduct:** I/we have read and understand ALL the policies and procedures as outlined on this form and in the Safekey Parent/Participant Handbook. I agree to abide by the program rules and regulations. If procedures are not followed, I understand my child or myself may be removed from the program. This authorization will be effective until the beginning of the next school year.

\_\_\_\_\_(Parent/Guardian #1 Initial) \_\_\_\_\_(Parent/Guardian #2 Initial)

**Social Distancing & Face Coverings (Masks):** I understand that social distancing will be encouraged by CCPR staff whenever possible with an understanding on limitations in social distancing with young children. All participants are required to wear parent/guardian provided face coverings (masks) while in the facility.

\_\_\_\_\_(Parent/Guardian #1 Initial) \_\_\_\_\_(Parent/Guardian #2 Initial)

I, Print Parent / Guardian #1, Print Parent / Guardian #2, acting on behalf of myself or my minor child do expressly and forever waive and release Clark County, Nevada, Department of Parks and Recreation and all their respective officers, employees, agents, or representatives from any and all liability for personal injuries or damages sustained, incurred, or arising from participation in any Parks and Recreation activity.

**PHOTO/VIDEO RELEASE:** By registering for any Clark County Parks and Recreation program, I agree to allow publication of photos or video taken of my child/children or myself at any program, event or facility associated with the Clark County Parks and Recreation Department.

Signature of Parent/Guardian #1	Date	Signature of Parent/Guardian #2	Date
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**DISCLAIMER: By typing your name above, you are signing this application electronically**

**Please note:** if there is no default email application set to submit the form please save completed document on the desktop & attach it to an email addressed to: **CCSafekeyRegistrations@ClarkCountyNV.Gov**