

FREE SUMMER YOUTH MENTORSHIP PROGRAM FOR YOUNG MEN!



CITY OF
SUN PRAIRIE
Wisconsin

PARKS, RECREATION & FORESTRY



SIGN UP NOW!

Vandenburg Heights Park

1020 Vandenburg St

Tuesdays & Thursdays, June 22 - August 19

2:45 - 3:45 pm - entering grades 5 - 7

4:00 - 5:00 pm - entering grades 8 - 10

The Element on Main Apartments

102 Park Circle

Meet in Community Room

Mondays and Wednesdays, June 21 - August 18

2:45 - 3:45 pm - entering grades 5 - 7

4:00 - 5:00 pm - entering grades 8 - 10



Program led by Darreon Steward,
Youth & Teen Neighborhood
Navigator for the City of Sun Prairie

Program Goals:

- Build a community between the youth of Sun Prairie
- Provide youth with tools for every day life
- Youth become invested and feel a part of the community
- Help youth become more aware of opportunities such as college, careers, trade schools, etc.
- Learn about living a healthy and active lifestyle
- Develop and foster resilience-building skills

Each session will focus on a different life skill such as cooking, resume-writing/job interviewing, self-care, wellness, etiquette, etc.

This is a drop-in program - just show up! However, all participants must first have a registration form and signed waiver and release of liability form on file prior to attending!

REGISTRATION FORM YOUTH MENTORSHIP PROGRAM



Youth 1 First Name: _____
Youth 1 Last Name: _____
Youth 1 Date of Birth: _____
Youth 1 Grade (entering for 2021-2022 school year): _____
Any health concerns, allergies, etc? _____

Youth 1 Site:
(circle one)
Vandenburg
The Element

Youth 2 First Name: _____
Youth 2 Last Name: _____
Youth 2 Date of Birth: _____
Youth 2 Grade (entering for 2021-2022 school year): _____
Any health concerns, allergies, etc? _____

Youth 2 Site:
(circle one)
Vandenburg
The Element

Youth 3 First Name: _____
Youth 3 Last Name: _____
Youth 3 Date of Birth: _____
Youth 3 Grade (entering for 2021-2022 school year): _____
Any health concerns, allergies, etc? _____

Youth 3 Site:
(circle one)
Vandenburg
The Element

Parent/Guardian First Name: _____
Parent/Guardian Last Name: _____
Parent/Guardian Date of Birth: _____

Address: _____
City, State, Zip: _____
Phone Number: _____
E-mail Address: _____

Parent/Gaurdian Signature: _____

Date: _____

WAIVER & RELEASE OF LIABILITY FORM

CITY OF SUN PRAIRIE

BEFORE SIGNING THIS WAIVER AND RELEASE OF LIABILITY, READ THIS ENTIRE DOCUMENT CAREFULLY. IF YOU SIGN THIS WAIVER AND RELEASE OF LIABILITY AND AN INCIDENT OCCURS RESULTING IN INJURY OR LOSS OF PROPERTY, THEN YOU WILL BE GIVING UP LEGAL RIGHTS THAT YOU MIGHT OTHERWISE HAVE. IF YOU DO NOT UNDERSTAND ANYTHING IN THIS DOCUMENT, OR IF YOU OBJECT TO ANY PROVISION CONTAINED IN THIS DOCUMENT, YOU SHOULD NOT SIGN THIS DOCUMENT AS IT IS DRAFTED, BUT RATHER SEEK ADVICE FROM YOUR LEGAL COUNSEL. REQUESTS FOR MODIFICATIONS MAY BE DIRECTED TO THE PARKS, RECREATION AND FORESTRY OFFICE AT (808) 837-3449 WEEKDAYS BETWEEN 8:00 a.m. AND 4:30 p.m.

By signing the Waiver of Liability, I understand that any activity with the City of Sun Prairie Parks, Recreation and Forestry Department has inherent risks associated with it, which could result in harm and/or losses to myself or my child(ren) whether or not known or readily foreseeable at this time, and which might result not only from my own act of omission, but also from the actions, inactions or negligence of others, or the condition of the premises or equipment used. No accident or other insurance is provided through the City of Sun Prairie.

By signing this Waiver of Liability, I fully accept all such risks of any injury, damage or loss regardless of severity that may be sustained and all responsibility for losses, costs and damages incurred in any and all activities connected with or associated with the City of Sun Prairie Parks, Recreation and Forestry Department.

By signing this Waiver of Liability, I agree to waive, relinquish, discharge, release and covenant not to sue the City of Sun Prairie, Wisconsin, its officers, employees and agents from all claims of injury, damage, or loss that may accrue arising out of, connected with, or in any way associated with the activities with the City of Sun Prairie Parks, Recreation and Forestry Department as identified in this Waiver of Liability. This waiver of liability does not apply intentional misconduct of the City of Sun Prairie.

Medical Emergency Release Waiver for Minors

In the event of a medical emergency, I authorize the Parks, Recreation and Forestry Department staff to obtain medical treatment for myself or my son/daughter or minor for which I am a guardian.

Photographic Release

By signing the Waiver of Liability, I hereby grant and convey unto the City of Sun Prairie all right, title, and interest in any and all photographic images and video or audio recordings made by the City of Sun Prairie during the undersigned's Activities with the City of Sun Prairie, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

I have read this Waiver and Release of Liability thoroughly and fully understand and enter into it on behalf of myself, my heirs, next of kin, assigns, and personal representatives. No one has made any representations, statements, or inducements that change or modify anything written in this Waiver and Release of Liability.

_____	_____	_____
Print Name of Participant	Print name of Parent/Guardian (if participant is a minor)	Age of Child (if participant is a minor)
_____	_____	
Parent/Guardian or Adult Participant Signature	Address	
_____	_____	_____
City, State, Zip	Phone Number	Date
Witness:		
_____	_____	
Signature	Date	
_____	_____	
Printed Name	Phone	