REGISTRATION INFORMATION

Registration is required for all programs.

Programs are subject to change without notice.

Confirmation receipts are emailed for fax and mail-in registration. Online registration receipts available under account information.

Registration will NOT be accepted over the phone. Fees are not pro-rated for missed classes or late registration. If program is full, you will be placed on a wait list. If space becomes available, City staff will contact you and provide a 24 hour response time before moving to the next person on the list. No class petitioning permitted.

Credit Cards Accepted

VISA

MAIL IN, WALK IN OR EMAIL

Registration form and payment to: OASIS Senior Center 801 Narcissus Ave. Corona del Mar, 92625

Hours: M-F, 8 a.m. - 5 p.m.

Email: OASISCenter@ newportbeachca.gov

WAYS TO REGISTER ONLINE

Available only prior to class start date.

- 1. Go to
- www.newportbeachca.gov/register
- 2. Click on Sign in
- 3. Enter Username & Password.
- 4. Click on Register
- 5. Filter Activities or Search for class
- 6. Click on Name of Activity.
- 7. Click Add to Cart.
- 8. Follow the steps for payment.

FAX

Fax your registration form and include your Visa, MC, Discover or Amex card number and expiration date to:

(949) 640-7364

Faxes are processed during regular business hours and only upon receipt of a completed and signed registration form

Exp. Date _____/_

First Name			Last Name	
Address		City	Zip	
Home Phone	Work/Cell Phone		Email	
Participant's Name	Gender	Class # Session	Class Name	Fee
PHOTO RELEASE I understand that for	rom time to tim	e City representatives may	Class Fees	
photograph activities of City recreation form, I authorize the City of Newport		. , , ,	N 11 1 1145 (1 1 470)	
taken by the City showing my partici to promote classes on the City's websi	pation or my ch	nild/children's participation	Non-residents add \$5 for classes \$74 & under OR \$10 for Classes \$75 & over	
future publications of the Newport Nav		, , , , , , , , , , , , , , , , , , , ,	Total Paid	
PROGRAMS hazardous to PARTICIPANT physical fitness to participate in the PF could create an unreasonable risk to PAPROGRAM PROVIDERS may terminate participation in the PROGRAMS could rnot limited to, strenuous physical activitexposure to moisture, heat, cold, humic limited to, scrapes, bruises, cuts, sprain cord injuries, internal injuries, or other i PARTICIPANT AGREES TO ASSUME ANY CERTIFY THAT PARTICIPANT AGREES, OTHE PROGRAM PROVIDERS HARMLESS I FORESEEN OR UNFORESEEN, KNOWN CCERTIFY under penalty of perjury under the	I's health or the ROGRAMS when ARTICIPANT or ot PARTICIPANT from the sult in bodily in the or exertion, strains, tearing njuries of any nawar AND ALL RISK N BEHALF OF PAFROM ANY AND OR UNKNOWN, Relaws of the states	health of others; (4) agree to requested by PROGRAM PROBLEM PROGRAM PROBLEM PROGRAM PROBLEM PROGRAM participation in PROGRAM plury, property damage, death riking or being struck by object and disease (including but not gor pulling of muscles or lighture whatsoever which could OF INJURY ON BEHALF OF PROBLEM AND ANYONE WHALL CLAIMS, ACTIONS, PROCE ELATED TO, CAUSED BY, OR after of California that the foregotters and requested the programme of the		essional of PARTICIPANT's cipation by PARTICIPANT PROGRAMS; (6) agree that ention; (7) understand that is a result of, including by the other persons or things, may include, but are not id or facial injuries, spinal JURY"); (8) CERTIFY THAT ARTICIPANT'S BEHALF; (9) LEASE, WAIVE, AND HOLD WHATSOEVER, WHETHER THE PROGRAMS; and, (10)
program or activity conducted or sponso safe and enjoyable activities for all partic from using abusive or foul language. 4. l	ored by the City or cipants: 1. Be resp Refrain from caus	of Newport Beach Recreation pectful of and to all participan sing bodily harm to self, other	iate behavior at all times while participating, being a s & Senior Services Department. The following guideline ts and program staff. 2. Take direction from program s participants, or program staff/supervisors.5. Refrain fr re to follow these rules may result in denial of program p	es are designed to provide staff/supervisors. 3. Refrain om damaging equipment,
Mandatory Signature:			Date:	
the second time. A full refund will be granted when	10 (for classes priced n cancelled by Recrea will be charged if the	\$74 and below) or \$20 (for classes p tion staff. One and two day classes re e request is made within one week of	riced \$75 and above) refund fee will be charged if the request is ma quire 5 business days notice for a refund or transfers. sign-up. After one week no refunds will be granted.	ade prior to class meeting for
Refund Processing Time/Payment Type - Chec	:k/Cash- Refunds proc	essed within 3-4 weeks by mailed ch	eck. Credit Card — Refunds processed within 3-5 days CVC	