



Community Inclusive Recreation Registration Form

Please use a separate form for each participant and complete both sides. Please print clearly, sign, and return to: Community Inclusive Recreation, 331 Jackson Street West, Battle Creek, MI 49037

Phone: 269-968-8249 - Fax: 269-969-6218 www.cirFUN.org

PARTICIPANT INFORMATION

First Name	Last Name	Birth Date	Male/Female
Address	City	State	Zip
Home Phone	Cell Phone	Email	

CONFIDENTIAL DEMOGRAPHIC INFORMATION

Household Income

Less than \$11,999 \$12,000—\$14,999
 \$15,000—\$24,999 \$25,000—\$49,999 \$50,000 & Above

Race/Ethnicity

African American Asian Caucasian
 Latino/Hispanic Native American Other

CONFIDENTIAL HEALTH INFORMATION

Open case at Summit Pointe? Yes No

If yes, case manager name: _____

Participant Requires Special Health Care and/or Accommodations

Asthma Diabetic Diet Interpreter
 Mobility Aide Personal Care Aide

Allergies & Medications—Use additional sheet when necessary

No known allergies Food Medicine
 Other: _____

Will Medications Need To Be Administered While Attending Programs? (If yes, please see program department to complete form)

Yes No

Restrictions/Adaptations—Use additional sheet when necessary

Participant can participate: Without restrictions

With the following restrictions/adaptations: _____

EMERGENCY CONTACT INFORMATION

Emergency Contact First Name	Last Name
Relationship To Participant	
Home Phone	Cell Phone

How Did You Hear About CIR? Friend Internet

Newspaper Other: _____

GUARDIAN INFORMATION I am my own guardian I am not my own guardian (complete information below)

Guardian First Name	Guardian Last Name		
Address	City	State	Zip
Home Phone	Cell Phone	Email	

PAYEE INFORMATION I am responsible for my own bills My guardian is responsible for my bills (same as above)

My payee is responsible for my bills (complete information below)

Payee First Name	Payee Last Name		
Address	City	State	Zip
Home Phone	Cell Phone		

Please check all programs you are interested in, along with transportation needs. (Please remember that space is limited for transportation). Depending on the number of spots available in a program, you may be placed on a wait list. Our registration is done on a first come, first serve basis for up to three programs. Please mark the top three programs of your choice.

YOU WILL RECEIVE NOTIFICATION BY MAIL CONFIRMING WHICH PROGRAMS YOU ARE REGISTERED FOR. *Updated October 2016

Mondays

- Cooking: Healthy After the Holidays**
Jan 9—Feb 13 | 10am-12pm
- Cooking: Vintage Recipes**
Feb 20—March 27 | 10am-12pm
- Cooking: Simple Recipes**
April 3—May 8 | 10am-12pm
- Cooking: A Little of This & That**
May 15—June 26 | 10am-12pm
- Bowling**
Jan 9—June 26 | 4-6pm
- CIR Adventure Club**
April 3—June 26 | 11am-1pm
- Life Skills**
Jan 9—March 27 | 11am-1pm

Tuesdays

- Jewelry**
Jan 3—March 28 | 10am-12pm
- Art & Nature**
April 4—June 27 | 10am-12pm
- Star Wars Movie Marathon**
Jan 3—March 21 | 4-6:30pm
- Movie Night**
March 28—June 27 | 4-6:30pm
- Cooking: Healthy After the Holidays**
Jan 3—Feb 14 | 10am-12pm
- Cooking: Vintage Recipes**
Feb 21—March 28 | 10am-12pm
- Cooking: Simple Recipes**
April 4—May 9 | 10am-12pm

- Cooking: A Little of This & That**
May 16—June 27 | 10am-12pm

- Music Fitness**
Jan 3—June 27 | 4-6pm

Wednesdays

- Walking Club**
Jan 4—June 28 | 10am-12pm
- Bowling**
Jan 4—June 28 | 4-6pm

Thursdays

- Water Aerobics**
Jan 5—May 25 | 2-4pm
- Sculpture**
April 6—June 29 | 10am-12pm
- Painting**
Jan 5—March 30 | 10am-12pm
- Soccer**
June 1—June 29 | 2-4pm
- Music Lovers**
Jan 5—June 29 | 4-6pm

Friday

- Game Night** | 5-7pm
Jan 27, Feb 24, March 24, April 28
May 26
- Dance** | 5-7pm
(Please specify date) o ALL Dates
o Jan 20 o Feb 17
o March 17 o April 21
o May 19 o June 16

Saturday

- Saturday Art** | 11am-1pm
Jan 7, Feb 11, March 11, April 8
May 6, June 10
- Cyber Saturday** | 1-3pm
Jan 7, Feb 11, March 11, April 8
May 6, June 10

Special Events

- Airway Lanes** Jan 6 | 11am-1pm
- K Wings** Jan 13 | Start Time 7pm
- Lunch & Movie** Feb 3 & Feb 10 | Time TBD
- Que the Creek BBQ Festival**
Feb 4 | 3-5pm
- Symphony** March 4 | Start Time 7:30pm
- Showstopper Dance Competition**
March 10 | 12-2pm
- Lugnuts Baseball** April TBD | Time TBD
- Travelin' Music** April 29 | 7:30-9pm
- Gilmore Car Museum** May 12 | Time TBD
- Renaissance Festival** May 13 | 11am-1pm
- Antique Tractor Pull**
June 3 | 10:30am-12:30pm
- Alligator Sanctuary** June 9 | Time TBD
- Post Band** Date TBD | 7-8:30pm

TRANSPORTATION REQUEST

ALL Programs

SOME Programs

If you selected "SOME" Programs, please specify which program(s) that you are requesting transportation for by putting the letter "T" next to the program name.

Transportation Policy

Transportation is a privilege and generally has a waiting list. If you need to cancel your ride to an activity, we require a minimum three-hour notice. Accumulating three no call/no shows for pick up could result in suspension or loss of transportation for the season. Please call the appropriate program coordinator at 269-968-8249 and leave a message to cancel your scheduled ride. Transportation services are provided without regard to race, color, national origin, in accordance to Title VI of the Civil Rights Act of 1964

WAIVER

I, the undersigned, understand that my participation in any activity or program is completely voluntary and that the activity or program being offered is for the benefit of the participant. CIR shall not be liable for any claims, injuries, or damages, of whatever nature, incurred by the participant, which are directly or indirectly attributable to the negligence, whether passive or active, of CIR, its agents or employees, arising out of, or in connection with, the activity or program. On behalf of myself and the participant, I expressly release CIR, its agents or employees from any such claims, injuries, or damages. Also signing, I give permission to CIR to use my photo, testimonial, and video footage for publicity purposes and take full responsibility of payment obligations. I understand that if CIR purchased tickets in advance for me, or a league I will still be responsible for payment if I am absent.

Signature of Guardian/Participant

Date

Internal Use Only: Please initial in your department once you've reviewed this registration form.

_____ FD

_____ PD