



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

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: _____

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: _____

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: Basic Cooking**
Jan 5—Feb 9 | 10am-12pm
- ☐ **Cooking: Comfort Foods**
Feb 16—March 30 | 10am-12pm
- ☐ **Cooking: Mystery Cooking**
April 6—May 11 | 10am-12pm
- ☐ **Cooking: Eating Healthy**
May 18—June 22 | 10am-12pm
- ☐ **Bowling**
Jan 5—June 22 | 4-6pm

Tuesdays

- ☐ **Fantasy Art**
Jan 6—March 31 | 10am-12pm
- ☐ **Art Thru The Ages**
April 7—June 23 | 10am-12pm
- ☐ **Movie Night**
Jan 6—June 23 | 4-6pm
- ☐ **Cardio Drumming**
Jan 6—June 23 | 4-6pm
- ☐ **Cooking: Basic Cooking**
Jan 6—Feb 10 | 10am-12pm
- ☐ **Cooking: Comfort Foods**
Feb 17—March 31 | 10am-12pm
- ☐ **Cooking: Mystery Cooking**
April 7—May 12 | 10am-12pm
- ☐ **Cooking: Eating Healthy**
May 19—June 23 | 10am-12pm

Wednesdays

- ☐ **Walking Club**
Jan 7—June 24 | 10am-12pm

- ☐ **Bowling**
Jan 7—June 24 | 4-6pm

Thursdays

- ☐ **Explore Art**
Jan 8—March 26 | 10am-12pm
- ☐ **Music Lover's**
Jan 8—June 26 | 4-6pm
- ☐ **Flag Football**
May 7—June 25 | 10am-12pm
- ☐ **Sculpture**
April 2—June 25 | 10am-12pm
- ☐ **A Little of This & That**
Jan 8—April 30 | 10am-12pm

Friday

- ☐ **Bingo Night** | 5-7pm
Jan 23, Feb 27, March 27
- ☐ **Comedy Night** | 5-7pm
April 24 & May 22
- ☐ **Dance** | 5-7pm
(Please specify date) o ALL Dates
o Jan 16 o Feb 20
o March 20 o April 17
o May 15 o June 19
- ☐ **Adulting 101** | 11am-1pm
Jan 9—April 24
- ☐ **Adventure Club** | 11am-1pm
May 1—June 26

Saturday

- ☐ **Saturday Art** | 11am-1pm
Jan 10, Feb 7, March 7, April 4
May 2, June 6

- ☐ **Cyber Saturday** | 1-3pm
Jan 10, Feb 7, March 7, April 4
May 2, June 6

Special Events

- ☐ **Battle Creek History Museum**
Jan 17 | 12-2pm
- ☐ **WMU Women's Basketball**
Jan 24 | Start Time 3:30pm
- ☐ **Ice Skating** Jan 25 | 4-6pm
- ☐ **Let's Go To The Movies** Feb 6 | Time TBD
- ☐ **Kalamazoo Valley Museum**
Feb 14 | 1:30-3:30pm
- ☐ **Que The Creek** Feb 28 | 4-6pm
- ☐ **KWings** March 8 | Start Time 3pm
- ☐ **Airway Lanes** March 13 | 2:30-5pm
- ☐ **Battle Creek Symphony Orchestra**
April 11 | Start Time 7:30pm
- ☐ **Kellogg Bird Sanctuary** April 12 | 12-2pm
- ☐ **Showstopper Dance Competition**
March 14 | 1-3pm
- ☐ **Renaissance Faire** May 9 | 11am-1pm
- ☐ **Detroit Lions VS FOP Basketball**
May 9 | 7-9pm
- ☐ **Lugnuts** May 17 | Start Time 1pm
- ☐ **Battle Jacks** Date TBD | Time TBD
- ☐ **Disaster The Musical**
March 14 | Start Time 7:30pm
- ☐ **Pow Wow** June 20 | 11am-1pm

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**