

# REGISTRATION INFORMATION

## SUMMERLIN COUNCIL CLASSES & PROGRAMS

### MAIL-IN

- A. Fill out registration form completely including activity number.
- B. Make check payable to the organization noted in the "Payable To" section of each class description. Note: You may need to complete multiple checks if you are registering for more than one program.
- C. Mail registration form and payment to (unless otherwise noted):

THE SUMMERLIN COUNCIL  
1910 SPRING GATE LANE  
LAS VEGAS, NEVADA 89134

All classes and programs are open to Summerlin Association Members and their guests only.

### REGISTRATION DROP-OFF

- A. Please drop sealed envelope including registration form and payment to the front desk at the Trails, Willows or Gardens Community Center.
- B. Where:
  - THE GARDENS COMMUNITY CENTER  
10401 GARDEN PARK DRIVE  
LAS VEGAS, NEVADA 89135  
702.562.4890
  - THE TRAILS COMMUNITY CENTER  
1910 SPRING GATE LANE  
LAS VEGAS, NEVADA 89134  
702.341.5500
  - THE WILLOWS COMMUNITY CENTER  
2775 DESERT MARIGOLD LANE  
LAS VEGAS, NEVADA 89135  
702.240.6500
  - THE VISTAS COMMUNITY CENTER  
11312 PARKSIDE WAY  
LAS VEGAS, NEVADA 89138  
702.360.1370
- C. Hours:
  - 9:00 a.m. - 9:00 p.m.; Monday – Friday
  - 8:00 a.m. – 12:00 p.m.; Saturday

## THE SUMMERLIN COUNCIL POLICIES

1. Payment is due at registration. Payment can only be made by check. Please refer to class descriptions for information on whom the check should be made payable. The Summerlin Council does not provide any payment plans or billing services.
2. All registrations are taken in the order received.
3. Registration Policies:
  - a. Registration or payments will not be taken at class (unless otherwise noted).
  - b. The Summerlin Council will only contact you if the class or program for which you are registering fails to meet minimum attendance requirements. Otherwise, you are enrolled. Your printed registration receipt will serve as your class confirmation.
  - c. A \$15 fee is charged on returned checks.
  - d. The Summerlin Council reserves the right to cancel any class should it fail to meet enrollment minimums. If a class or program is canceled by The Summerlin Council, a refund will be processed (unless otherwise noted).
  - e. The Summerlin Council does not prorate any class due to late registration or absence from class (unless otherwise noted).
  - f. Times, dates, and locations are subject to change without notice.
  - g. Each class has preset minimums and maximums determined by the instructor and/or The Summerlin Council according to availability and/or facility limitations. Please register early to ensure your enrollment.
4. Cancellations must be made in writing and submitted to The Summerlin Council at either the Trails, Willows, Vistas or Gardens Community Centers, by fax at 702.256.1670, or by Email at [summerlink@summerlincouncil.com](mailto:summerlink@summerlincouncil.com). Cancellations will not be accepted by phone. Class cancellations made prior to the first day of class will result in a \$5 administrative fee. No refunds will be given after the first class.
5. When possible, special accommodations for persons with special needs will be made for classes and programs. Please notify us at the time of registration.
6. The Summerlin Council members participate in classes, programs, or events at their own risk.
7. The Summerlin Council will not administer any medications or perform any medical procedures for any person participating in a class or program.

# REGISTRATION FORM

Member  Sponsored Guest of \_\_\_\_\_ (additional 30% registration fee applies)

Participant Name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Sex \_\_\_\_\_  
MM / DD / YY

Member ID# \_\_\_\_\_  
(Located underneath barcode)

Phone Number (Home) \_\_\_\_\_ Phone Number (Cell) \_\_\_\_\_

Street Address \_\_\_\_\_ Zip Code \_\_\_\_\_

E-mail Address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Day Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Class Name	Activity No.	Dates	Fee

*\*Please Refer To The "Payable To" Section Of Each Class Description To Obtain The Name Of The Organization To Whom The Check Should Be Made Payable.  
 Note: You May Be Required To Complete Multiple Checks.*

**TOTAL FEE** \_\_\_\_\_

**CHECK NUMBER** \_\_\_\_\_

## CLASS CANCELLATION AND REFUND POLICY

Cancellations must be made in writing and submitted to The Summerlin Council at either the Trails, Willows, Vistas or Gardens Community Centers, by fax at 702.256.1670, or by Email at summerlink@summerlinCouncil.com Cancellations will not be accepted by phone. Class cancellations made prior to the first day of class will result in a \$5 administrative fee. No refunds will be given after the first class.

**I have read and understand the refund and cancellation policy** \_\_\_\_\_  
*Signature*

The Summerlin Council prohibits its employees, agents, and instructors from administering any medication to class members. Any individual medical need that requires the taking of prescription or other medication (e.g., insulin) is the sole responsibility of the individual taking the medication and/or that of the individual's parents or legal guardians.

The Summerlin Council does not promote or encourage a personal or professional relationship between class participants and class instructors, and is not responsible for any personal or professional relationships entered into between class members and class instructors.

In consideration of your accepting this registration, I hereby agree to indemnify and hold harmless The Summerlin North Community Association, The Summerlin South Community Association, The Summerlin West Community Association, Summerlin Centre Owners Association, The Summerlin Council, and Howard Hughes Properties, Inc. and The Howard Hughes Company, LLC. and any of their officers, agents, and employees from any liability or claim or action for damages resulting from or in any way arising out of the participation in the program by the person registered.

In consideration of your accepting this registration, I hereby give The Summerlin Council and The Howard Hughes Company, LLC. full and unlimited permission, authority and release of any and all rights I may have to use any photographs, film, tape for any means of advertising, promotion and publication for all purposes of advertising and promotion which is desirous of undertaking. I hereby declare that my permission, authority and release also allows retouching, editing, cropping or other devices aimed at emphasis and composition of the material for the purposes desired by companies mentioned above.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

If under 18, signature of parent or guardian is required