

CO-REC CLUB



City of Torrance Community Services Department ▪ Recreation Services Division

Co-Rec Mail-In Membership Application

Name _____

Address _____ City _____ Zip _____

Phone Number (_____) _____ Emergency Number (_____) _____

Birthdate _____ Grade (in September) _____ Middle School (attending in September) _____

Parent Name: _____ Parent E-Mail: _____

Please check one: New Membership or Returning Member and Male or Female

Payment: \$15.00 checks or money orders payable to "City of Torrance"

A copy of a current Middle School ID or school schedule is mandatory for memberships.

(Note: Parent Connect, eTUSD or notes will not be accepted as proof of grade or residency.)

Mail to: Torrance Community Services Department

Attn: Co-Rec Club ▪ 3031 Torrance Blvd., Torrance, CA 90503

Waiver of Liability / Permission to Use Photos

I, the undersigned, do hereby agree to allow the individual(s) named herein to participate in the aforementioned activity(ies) and I further agree to indemnify and hold the City of Torrance harmless from and against any and all liability for any injury which may be suffered by the aforementioned individual arising out of or in any way connected with participation in this activity. I also agree, as a participant/parent/guardian of any paid or free event, class, activity, or program, to grant full permission to the City of Torrance to use my name and any photographs, videographs, motion pictures, or recordings for any publicity and promotion without obligation or liability to me. I verify that all of the above information is true and accurate.

Parent Signature: _____ Date: _____

Torrance Community Services Department

www.Recreation.TorranceCA.Gov • 310/618-2930

"Creating and Enriching Community through People, Programs and Partnerships"