

Registration Form

City of Torrance
 3031 Torrance Blvd.
 Torrance CA 90503
 (310) 618-2720 Telephone
 (310) 781-7598 Fax
 (310) 618-2723 Online Helpdesk
Enroll@TorranceCA.Gov



General Information

- All classes and programs are subject to change or cancellation.
- Registration and payment is required at the time of enrollment and must be received before attending any class or program.
- Students must be age appropriate by the first class unless otherwise noted.
- If a class is full at the time of registration, you may register for the waitlist. Please wait to be contacted by City staff prior to attending the class.
- Torrance Residents must submit proof of residency the first time they register, if they move to a new Torrance address, or if mail is returned.
- Improperly submitted registrations will not be processed.

How to Register:

To have the best opportunity of getting your desired class(es), register in the following PRIORITY order.

- 1) **Online** – must have an account torrance.rec.us
- 2) **Walk-in** – 3031 Torrance Blvd.
- 3) **Fax** – (310) 781-7598
- 4) **Mail** – Registration Office
 3031 Torrance Blvd., Torrance, CA 90503

HEAD OF HOUSEHOLD		
First Name	Last Name	
Address		
City	State	Zip
Email	1st Phone	2nd Phone

PARTICIPANT'S FULL NAME	BIRTHDATE	GENDER	ACTIVITY NUMBER	ACTIVITY NAME	FEE
<i>A surcharge will be added to all credit and debit card transactions.</i>					GRAND TOTAL

CREDIT CARD INFORMATION	
I Hereby Authorize The Use Of My:	<input type="checkbox"/> MasterCard  <input type="checkbox"/> Visa  <input type="checkbox"/> Discover  <input type="checkbox"/> American Express 

Print Name As It Appears On Card:		
Credit Card Number:		
Security Code:	Expiration Date: Month	Year
Signature:		

FOR OFFICE USE ONLY
Receipt #: _____
Date: _____
Intials: _____

CODE OF CONDUCT
 The City of Torrance does not discriminate on the basis of race, color, religion, sex, age, national origin, veteran status, sexual orientation, gender identity, disability, or any other basis of discrimination. We need all participant's cooperation to reach this goal. Behavior becomes unacceptable when it impinges on the rights of other, when it could result in injury to oneself or others, when it disrupts classes, or when it could result in damage to the building or equipment.

CANCELLATION POLICY
 I understand that the office must be notified of a refund request at least one (1) working day prior to the first class and one week prior to the first class for classes that meet less than 6 times. I also understand that a 20% service charge will be withheld per class, per participant. Exceptions to this policy will be noted in the Seasons Catalog and on your receipt.

WAIVER OF RELEASE & LIABILITY
 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 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.

For the complete Code of Conduct and Cancellation Policy visit www.TorranceCA.Gov/ClassRegistration. I verify that all the above information is true and accurate and I agree to comply with the Code of Conduct, Refund Policy and Waiver of Release & Liability.

MANDATORY SIGNATURE: _____ **DATE:** _____