

registration information



Program Eligibility

1. Youth and adult City of Brookfield Residents are eligible for all City-sponsored programs and activities.
2. Youth and adult Elmbrook School District Residents (does not include open enrollment students who are not residents of the City of Brookfield) are eligible for all City-sponsored programs/activities and will be charged one and one-half the registration fee charged to City residents unless otherwise specified.
3. Youth and adult non-residents of the City of Brookfield and/or the Elmbrook School District are eligible to register for instructional programs one week prior to the start of any class as long as openings are available and will be charged double the registration fee established for residents. The Parks, Recreation & Forestry Department reserves the right to limit the number of non-residents in any program and **NO CLASSES WILL BE ADDED OR EXPANDED TO ACCOMMODATE NON-RESIDENT PARTICIPATION.**

Fees

Activity fees noted in this brochure are for residents of the City of Brookfield. Elmbrook School District residents who do not reside within the City must pay an additional fee of one-half the regular fee unless otherwise specified. Non-residents of both the City and Elmbrook School District will be charged double the registration fee established for residents. The Parks, Recreation and Forestry Department reserves the right to limit the number of non-residents in any program. Non-residents will be able to register for programs one week prior to the start of any program as long as openings are available. Programs (non-instructional) and admissions include a sales tax in accordance with the Department of Revenue Laws.

Fee Waiver

It is the policy of the City that program participants help defray the overall costs of the activity through the assessment of fees and charges. However, the City does not wish to exclude Brookfield **children** who are unable to pay these fees due to unemployment of a parent, illness, or other hardships that might occur. Parents who feel they are unable to afford the fees for a program should contact the Recreation Office prior to registering for the activity. Eligibility is based on the guidelines of the Federal Free and Reduced Lunch program. To expedite the application process, eligible families are asked to provide a copy of the letter of qualification for this program. Further information can then be obtained for the Parks and Recreation Commission's review and determination.

Cancellations/Transfers/Refunds

1. **Cancellations**—The Department reserves the right to cancel, postpone or combine a class or program.
2. **Transfers**—Class changes may be made subject to class availability and staff approval prior to the starting date of the class. A request for a class change must be made with the Parks and Recreation office.
3. **Refunds**—Persons registered for a program which is canceled by the Department shall receive a full refund. Persons requesting a refund due to circumstances of illness, injury, or moving shall receive a full refund. Refunds will be pro-rated from the start of the program (physician's verification required). **Persons requesting to cancel their registration for reasons other than listed above shall receive a refund, less a \$5.00 service charge, when request is in writing two (2) full business days prior to the program start. You may email your request to: parksandrecreation@ci.brookfield.wi.us No refunds or credits after that time.**

PROGRAM REGISTRATION FORM - MAY BE DUPLICATED

Last Name		First Name			Email		
Address		City & Zip		Home Phone			
Class choice	Class #	Activity	Location	Day(s)	Date(s)	Time	Fee
1st Choice							
2nd Choice							
1st Choice							
2nd Choice							
						Total \$	

I, the undersigned, do hereby agree to allow the individual(s) named herein to participate in the activity(ies) indicated. I am aware of and understand that there may be potential risks inherent with participation in any recreation activity and that the City of Brookfield does not provide accident insurance and cannot assume responsibility for injury to any participants in its recreation programs. I further understand the eligibility requirements for the program as stated in the Department brochure, and that there is **NO TRANSFER OF FEES ALLOWED.**

Signature X _____
 Participant Parent Guardian Other

FOR OFFICE USE ONLY

___R	___Cash	Fee	Rec'd
___NR	___Check	Paid: _____	Date: _____