

Outdoor Programs with Three Rivers Park District



Walk When the Moon is Full; Sprouting Grass Moon Sunday, April 29; 8-9:30 pm

Adapt your senses and explore the natural world at night. Dress for the weather and walking on uneven, woodchip trails. Three Rivers Park District staff will guide the walk.

Activity: 140710

Who: Ages 6 & older; (6-17 must be paired w/adult)

Where: Sochacki Park (meet in parking lot)
3500 June Ave N, Robbinsdale

Fee: FREE (please preregister)



Canoeing; Friday, June 22, 9:30-11 am

Join us as we canoe around Medicine Lake while learning proper stroke techniques, water safety and boat control along with getting in and out of a canoe. Be prepared to be outside and possibly get wet, dress for the weather. Instructional staff is provided by Three Rivers Park District. Additional waivers will be needed to participate. Must provide own transportation to French Regional Park. *We must have reached a minimum number of registrations by June 7.*

Activity: 210714

Who: Youth 8-14 years

Where: French Regional Park
12605 Rockford Rd, Plymouth

Fee: \$20

Note: Must complete waiver form on back!



Birding Hike; Thursday, May 24; 10 am-12 pm

Learn tips and tricks to locate and identify birds from a naturalist while exploring the park. Instructional staff is provided by Three Rivers Park District. All equipment provided. Dress to be outdoors the entire time, rustic restrooms available. *Minimum registration must be received by May 21.*

Activity: 120708

Who: Ages 17 years & older

Where: Sochacki Park (meet in parking lot)
3500 June Ave N, Robbinsdale

Fee: FREE (please preregister)



Stand-up Paddleboarding & Slacklining; Friday, August 17, 9-11 am

Have fun testing your balance skills with these two activities. Stand Up Paddleboarding (SUP) is a cross between surfing and paddling. Slacklining will have you walking on a narrow, flexible piece of webbing set low to the ground. Be prepared to be outside and possibly get wet, dress for the weather. Instructional staff is provided by Three Rivers Park District. Additional waivers will be needed to participate. Must provide own transportation to Fish Lake. *We must have reached a minimum number of registrations by August 1.*

Activity: 210710

Who: Youth 8-14 years

Where: Fish Lake Regional Park (meet at Pavilion)
14900 Bass Lake Rd, Maple Grove

Fee: \$22

Note: Must complete waiver form on back!

Registration and waiver forms on back.

FYI: For more information or to register please check online at <https://webtrac.robbinsdalemn.com> or you can check our website: www.robbinsdalemn.com. Mail/drop off with payment to Robbinsdale City Hall, 4100 Lakeview Ave. N, Robbinsdale, MN 55422. Or you can call 763-531-1278, Monday-Friday, between 8:30 am and 4:00 pm. Refunds, program credits or transfers are allowed up to registration deadline. All refunds are subject to a \$5 service fee. Confirmations are not sent. Participants should attend the class unless informed it has filled or been cancelled. No refunds after the deadline. Payment by check authorizes the city to use information from your check to make a one-time electronic transfer from your account to process the payment.

REGISTRATION & WAIVER FORMS

Please print clearly. Make checks payable to City of Robbinsdale; 4100 Lakeview Avenue No., Robbinsdale, MN 55422

Youth's Name(s) _____ Birthdates: _____

List Program(s) Registering for: _____ Total AMT: _____

Contact's Name: _____ Phone(H) _____ (W or cell) _____

Contact's email: _____ ADDRESS _____

CITY _____ ZIP _____ Payment: CASH CHECK CREDIT CARD

Credit Card Number: _____ 3 or 4 Security Code: _____ Expiration Date: _____

Card Holders Signature: _____

Please list any special needs or equipment participant may need: _____

Liability Waiver: The undersigned acknowledges that recreational and sports programs involve inherent risks of personal injury. It is agreed that participation in the program is voluntary and at the participant's sole risk. The City shall not be liable for any claims, demands, injuries or damages whatsoever to the participant or participant's property arising out of the participant's participation in the program. On behalf of the participant, the undersigned releases and discharges the City, its employees or agents from all such claims, demands, injuries or damages, except those directly caused by the gross negligence of the City, its employees or agents. **Photographs** are occasionally taken and may be used for promotional purposes of the recreation programs we offer. If you wish not to be photographed, check here ____

Signature Participant or guardian, if participant is under 18 : _____ **Date:** _____



Name:	Age:	Phone:
Address:		
Emergency Contact:		
At (Daytime Phone):		(Evening Phone):
I have a medical condition of which staff should be aware of: YES NO (If Yes, Continue Below)		
Asthma:	Seizures:	
Heart Condition:	Allergies To:	
Diabetes:	Other (Specify):	

Release and Waiver for Paddle Sports

As a participant in Three Rivers Park District Paddle Sports, the purchaser user of this program (parent or legal guardian in the case of minor) understand that there are serious risks to using a stand up paddle board, a canoe or kayak on water, including the risk of drowning. And, in order to induce Three Rivers Park District to participate in this program and use this equipment, I have provided this release and waiver. I hereby assume such risks and agree to release Three Rivers Park District from any claims arising from the inherent risks of these recreational activities. In addition, in consideration of Three Rivers Park District providing me with the opportunity to use Three Rivers Park District facilities, I hereby agree to release Three Rivers Park District from all claims of personal injury or property damage caused by the negligence of Three Rivers Park District, its officers, employees or agents. I agree that the user has made no misrepresentations to Three Rivers Park District, its servants, agents, employees or volunteers in regard to user height, weight, age or ability. I agree that this service was bargained for and I am aware that alternative services and products are available.

I ACCEPT THE RESPONSIBILITY FOR MYSELF AND THE FOLLOWING CHILDREN:

Signature _____

Date _____