



Village of Elwood Community Planting Garden

Reservation Timeline:

New Residents can reserve a plot from January 1 -February 28

Non-Residents can reserve a plot March 1

July 30 – August 31 Returning members may reserve their existing plots

September 1 – October -1 New Residents may reserve plots

October 1- 19 -Returning members may reserve remaining plots.

Plot Reservation
Plot Size: 10x10
Cost: \$25.00 Per Plot

Name _____ Email _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

of Plots Request _____ Total Owed: # of Plots _____ x \$25 per Plot=\$ _____

WAIVER AND RELEASE OF ALL LIABILITIES ARISING OUT OF PARTICIPATION IN RECREATION PROGRAMS OF THE VILLAGE OF ELWOOD PARK AND RECREATION DEPARTMENT

The undersigned, being under no legal disability, and in consideration of the opportunity to participate in recreation and/or athletic activities conducted by the Village of Elwood Park and/or its recreations Department, agrees as Follows:

I hereby release, and discharge the Village of Elwood, its Park and Recreation Department, the Facility Owner and/or Host, their officers, servants, agents, and employees from all injuries, losses, and damages to my person that shall have been caused or may at any time arise as the result if injuries, losses, and damages to my person that shall have been caused or may at any time arise as the result of my participation in such activities. I intend to completely, absolutely, and finally release said Village of Elwood, its Park and Recreation department and the Facility Owner and/or Host, the aforesaid persons from all liability arising wholly or partially from the cause aforesaid. I do further state and certify that I am in good physical condition, and physically and emotionally capable of participation in such recreation/athletic programs. As a participant in the program, I recognize and acknowledge that there is a certain risk of physical injury and agree to assume the full risk of any injuries, including death, damages or losses which I may sustain because of participating in any manner, in all activities connected with or associated with such program. I agree to waive and relinquish all claims that may have against the Village of Elwood, its Park and Recreation Department, the Facility Owner and/or Host, their officers, servants, agents, or employees as a result of participating in the program. The term "I," "me" and "my" refer to parents or guardians as well as participants in the program, I further understand and agree that terms such as "participation", "programs" and activities' referred to in this Waiver and Release, include all exercises and physical movements of any nature while I am participating in the program. I understand the nature of these program(s) for which I am registering and have read and fully understand this Waiver.

SIGNATURE _____ DATE ____/____/____

Please return the reservation form and payment to Elwood Village Hall, 401 East Mississippi Ave.
For more information, contact the Park Coordinator at 815-423-5011.

Office

Use Date Received: _____ Amount Paid: _____ Payment Method: _____ CK# _____