

H. Louis Lake Senior Center
11300 Stanford Ave. Garden Grove, CA 92840
Tel: (714) 741-5253 Fax: (714) 741-5246

SENIOR MOBILITY TRANSPORTATION
WAIVER

I absolve and hold harmless the City of Garden Grove, its officers, agents, and employees from and against any and all liabilities or claims for damages to myself, or the minor person registered to participate for which I have legal responsibility and authority, resulting from or arising out of participation in City activities, except to the extent such liabilities or claims for damages are caused by the gross negligence or willful or wanton misconduct of the City, its officers, agents or employees. I hereby consent to treatment and all medical care deemed necessary as a result of said treatment. I hereby grant the City of Garden Grove the right to photograph my participation in the activities in which I participate and use the photographs in further recreational brochures.

Client's Name: _____

Client's Signature _____ Date: _____

Staff's Signature _____ Date: _____

Please indicate the day(s) and time(s) for which you would like to attend. Please note staff will make every attempt to grant specific schedules, but not guranteed.

	Monday	Tuesday	Wednesday	Thursday	Friday
Pickup					
Come Home					