

NEWTOWN PARKS & RECREATION PROGRAM REGISTRATION FORM

Town Hall South, 3 Main Street
Newtown, CT 06470

<u>Household Contact/Parent/Guardian #1</u>	<u>Household Contact/ Parent/Guardian #2</u>
Name _____	Name _____
Address _____	Address _____
City _____ State _____ Zip _____	(Address Only fill out if different than #1) City _____ State _____ Zip _____
Home Phone _____	Home Phone _____
Work Phone _____	Work Phone _____
Cell Phone _____	Cell Phone _____
Email Address _____	Email Address _____

Emergency Contact(other than parent/guardian)

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

PARTICIPANT REGISTRATION								
						Youth Programs Only		
Activity #	Activity Name	Last Name(if different)	First Name	Age	Gr	Date of Birth	Sex	Fee
MAKE CHECKS PAYABLE TO NEWTOWN PARKS AND RECREATION							PARK GIFT FUND	
							TOTAL	

List any specific health problems, allergies or medications _____

Comments _____

We will be happy to give refunds or credits minus a \$10.00 administration fees if notification is received one (1) week prior to the start of the program

WAIVER OF TOWN LIABILITY

I, undersigned, assume all risks and hazards incidental to such participation in the above mentioned Newtown Parks & Recreation Department activity; and I hereby, waive, release, absolve indemnity, and agree to hold harmless the Newtown Parks and Recreation Department and the program instructors, organizers, sponsors, etc. for any claim arising out of injury to myself/child. Participation is at my/my child's own risk. There is no medical coverage.

PHOTO RELEASE: THE NEWTOWN PARKS AND RECREATION DEPARTMENT MAY VIDEOTAPE OR TAKE PHOTOGRAPHS OF PARTICIPANTS ENROLLED IN RECREATION ACTIVITIES/PROGRAMS. THESE PHOTOS AND/OR VIDEOTAPES MAY BE USED FOR PROMOTIONAL PURPOSES.

Parent/Guardian/Self Signature _____ Date _____