Registration Form

1) **Please print legibly, filling in all necessary information. If you need additional space, please attach a sheet of paper and provide the same information required.**
2) **Please read, sign and date the Waiver form.**
3) **Do Not mail cash. Check or money order is accepted. Include non- resident fee when applicable.**

Parent/Guardian's Name:_____
Participant's Name:_____ **Date of Birth:**_____
Address:_____ **City:**_____ **Zip:**_____
Home Phone:_____ **Cell Phone:**_____**Emergency #**_____
Email Address:_____
Medical Conditions/allergies:_____
Shirt Size:_____

Program Name	**Code**	**Fee**

Total Due_____

I hereby certify that as a participant/parent/gaurdian/ in this program, I recognize and acknowledge that such participation includes certain risks and I agree to assume the full risk of any physical injuries, including death, damages or loss which I or the above participant may sustain as a result of participation in all and all activities connected or associated with this program.

Additionally, I agree that as a participant, parent. Or guardian, that I will follow the policies of the Chatham Recreation Department, including procedures for transportation, program notification, refunding and discipline.

And, I specifically waive and relinquish any and all claims and causes of action which I or the named participant, have or which may accrue to me or to the named participant for injuries, death, damage or loss against the Village of Chatham and its trustees, officers, agents, volunteers and employees arising out of, connected with or in any way associated with participation in the program.

I also agree to release any photographs or videos taken during the programs to be used by the Village of Chatham for advertisements, training or other purposes.

Signature:_____ **Date:**_____