

# Readington Recreation Children's Registration Form

### Participant Information

Name First _____	Last _____	Birth Date _____	Shirt Size if Team Sport: YS ___ YM ___ YL ___
Address _____		Age _____	AS ___ AM ___ AL ___
City _____	State _____ Zip _____	Grade _____	
Phone (____) _____	Cell(____) _____	Male ___ Female ___	

Known Allergies, Medical Problems or Prohibitions:

### Parent Information

Name First _____	Last _____
Phone (____) _____	Cell(____) _____
<b>e-mail _____ All program information is distributed via e-mail</b>	

### Parent Information

Name First _____	Last _____
Phone (____) _____	Cell(____) _____
<b>e-mail _____ All program information is distributed via e-mail</b>	

### Emergency Contact – NOT DOCTOR OR PARENT

Name First _____	Last _____	Other Information _____
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### PROGRAM INFORMATION

PROGRAM (S) _____	LOCATION _____
DATE(S) _____	TIME from _____ to _____ COST _____
PROGRAM (S) _____	LOCATION _____
DATE(S) _____	TIME from _____ to _____ COST _____
TOTAL AMOUNT ENCLOSED _____ CHECK # _____	

### Approval and Emergency Medical Release

\* I, the undersigned, give my approval for my child to participate in this activity and hereby waive, release and agree to hold harmless Readington Township, the Recreation Committee, and all volunteers and persons involved in the program from any claim arising from injury to my child.  
 \* I understand that in the event my child is injured as a result of participation in any recreational activity in connection with this program, that reasonable efforts will be made by Readington Township, Recreation Committee or persons authorized on their behalf, to contact me. However if it is determined by a Certified EMT Volunteer, Police Officer, Physician or Surgeon that my child \_\_\_\_\_ is in need of emergency medical or surgical treatment, then I give my consent to such treatment.

\_\_\_\_\_ I have read the Readington Recreation CODE OF CONDUCT on the website [www.ReadingtonRecreation.org](http://www.ReadingtonRecreation.org) and agree to abide by it.

\_\_\_\_\_ I have read and understand the Readington Recreation REFUND POLICY on the website [www.ReadingtonRecreation.org](http://www.ReadingtonRecreation.org).

Signed (parent/guardian) \_\_\_\_\_ Date \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Cell(\_\_\_\_) \_\_\_\_\_