



EHT DEPARTMENT OF PARKS AND RECREATION REGISTRASTION FORM

Adult/ Guardian:

Name: _____ Date of Birth: ___/___/_____ Phone Number: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Secondary Phone Number (Optional): _____

Emergency Contact: Name: _____ Phone: _____

Second Household Member / Child:

Name: _____ Date of Birth: ___/___/_____ Grade: _____

Email: _____ Secondary Phone Number (Optional): _____

Emergency Contact: Name: _____ Phone: _____

List Classes Registering For:

1.	4.	7.
2.	5.	8.
3.	6.	9.

WARNING, LIABILITY, ACKNOWLEDGEMENT, AND ASSUMPTION OF RISK:

I understand that participation in Recreation Sponsored Activities involves risk of injury or loss of property. These risks include but are not limited to collisions with other participants, being hit by ball or bat, allergic reactions, theft, tripping or falling, contact with other participants that may have infectious (communicable) diseases, physical exertion or other accidents. In consideration of acceptance of my registration I, intending to be legally bound do hereby for myself, my child, my heirs, executors and administrators, waive, release, and forever discharge any and all rights, claims for damage which I/or my child may have or acquire against the Township of Egg Harbor, Egg Harbor Township Department Parks and Recreation, its Employees/Volunteers, its Sponsored Youth Sports Organizations, its vendors or agents of this program individually or collectively for any and all injuries suffered by me/my child at or during said Recreation Sponsored Activity. I further understand that no insurance coverage is provided by Egg Harbor Township. MY SIGNING OF THIS FORM INDICATES THAT THE INFORMATION SUPPLIED ABOVE IS TRUE AND ACCURATE . I FURTHER UNDERSTAND THAT SHOULD ANY OF IT BE FOUND TO BE FALSE , I OR MY CHILD WILL BE REMOVED FROM THE PROGRAM, EVENT OR ACTIVITY. PHOTO RELEASE Pictures or video clips may be taken while participating in Egg Harbor Township Parks and Recreation activities for publicity. If you do not concur, please contact the Parks and Recreation Department at (609) 272-8120. OPRA Notification: Please be advised that the information supplied on this form may be subjected to the Open Public Records Act.

Signature: _____ Date: _____

For Office Use Only:

Resident: (Y)__(N)___

Date Processed: _____

Initials: _____