STEVENS PARK SUMMER RECREATION PROGRAM
REGISTRATION FORM
June 22 – August 5, 2016

Child's Name _____ Birth Date _____ Age _____

Parent or Guardian Name _____

Address _____

Home Phone # _____ Cell # _____ Work # _____

Email address _____

Allergies if yes, please specify:_____

_____

I do_____ do not _____ give my child permission to leave during lunch.

In case of emergency, notify:

Name _____ Name _____

Address _____ Address _____

Phone # _____ Phone # _____

RELEASE OF LIABILITY/PHOTO RELEASE

As parent or legal guardian of the above named child, I certify that said child has my permission to attend and participate in the Poolesville Summer Recreation Program. In signing this form, I hereby waive and release all other participants, the host, sponsors, and all other officials or parties involved in the recreation program. I also hereby grant the authorities the unconditional right to use the name, voice, and photographic likeness of the above named child in connection with any of their articles or press releases, but not as endorsement.

I understand that said child is enrolled for instruction and experience in sports, games, and crafts and is expected to be a participant in the planned activities. It is further understood that any child who excuses him or herself from the activities is expected to "sit-out" completely for the duration of the session. Parents are responsible for any damage done by the youngsters absenting themselves from the activities.

Signature:_____ **Date:**_____

(Parent/Legal Guardian)

TOWN OF POOLESVILLE

PARENTAL APPROVAL FOR FIELD TRIPS TO WESTERN MONTGOMERY COUNTY POOL

DIRECTOR: SANDY CHITTENDEN

DATES: JUNE 28, JULY 5, JULY 12, JULY 19, JULY 26, AUGUST 2

DESTINATION: WESTERN MONTGOMERY COUNTY POOL

COST PER CHILD: $4.00 PER CHILD – UNLESS PARENT PROVIDES AN ORIGINAL POOL PASS.

TRANSPORTATION: PRIVATE VEHICLES DRIVEN BY STAFF AND PARENT VOLUNTEERS.

TIME OF DEPARTURE: 11:30 AM
TIME OF RETURN: 3:00 PM

WRITTEN PERMISSION IS REQUIRED FOR ALL FIELD TRIPS. NO VERBAL PERMISSION WILL BE ACCEPTED.

CHILD'S NAME	PARENTS NAME	EMERGENCY PHONE
_____	_____	_____

DO YOU GIVE PERMISSION FOR THIS CHILD TO GO ON THE ABOVE STATED FIELD TRIPS?

YES _____

PARENT'S SIGNATURE AND DATE _____