

Hanover Parks and Recreation Youth Registration Form

Participant Name _____ **DOB** _____ **Age** _____ **Grade** _____ **M/F**
(Circle)

Address _____ **Email Address** _____

Town _____ **Zip** _____ **Home Phone** _____

Mom's Cell # _____ Mom's Work # _____

Dad's Cell # _____ Dad's Work # _____

Emergency Contact – if parent cannot be reached at the above #
Name _____ Phone _____ Relationship _____

1. Program _____	Class/Day _____	Time: _____	Amount Paid: _____
2. Program _____	Class/Day _____	Time: _____	Amount Paid: _____
3. Program _____	Class/Day _____	Time: _____	Amount Paid: _____
<i>Office Use Only – Received</i> _____ <i>Check #</i> _____			

Relevant Medical Information (allergies, etc.):

Family Physician _____ **Phone:** _____

Insurance Company Name _____ **Policy #** _____

Policies and Procedures

1. Registration will begin immediately and will continue until programs are filled on a first paid, first served basis or a deadline specified. Check or money order should be payable to: **Hanover Parks and Recreation**. Please include registration form with check.
2. All fees are payable in advance to Hanover Parks and Recreation. Individuals are registered only when full payment and registration is received by the Parks and Recreation Department. No phone reservations will be accepted. Financial assistance is available for most programs; considerations should be expressed to the Recreation Administrator.
3. The Parks and Recreation Department reserves the right to postpone, cancel or change a program for any reasonable cause. The Parks and Recreation Department maintains a no refund policy unless a program is cancelled or postponed.
4. No confirmations are sent by the Parks and Recreation. Please note all information on your calendar. You may call us to confirm your mail-in or drop off registration.
5. Proper behavior in Parks and Recreation programs is expected at all times. If improper behavior persists, individuals will be excused from further participation in Park and Recreation programs.

RELEASE: I realize that participation in Parks and Recreation programs involves some risks but regard the benefits to outweigh the risks. I agree to hold harmless the Town of Hanover, Hanover Parks and Recreation, its agents, employees, contracts and volunteers from any and all claims sustained while participating in these programs. Hanover Parks and Recreation does not provide medical insurance for participants. Participants are advised to have adequate personal coverage and it is required for any field trips. Permission is granted for any emergency medical treatment needed. I agree that photographs taken during department activities may be used for promotional purposes.

Date _____

Signature of Parent or Guardian (if participant is under 18)