

Waterford Recreation & Parks Commission Fall 2022 REGISTRATION FORM

Please complete the registration form below, including all pertinent information, and return the completed form with payment to the Recreation and Parks Office.

Accepted Form of Payment: Cash, check or credit (NO AMX). Checks should be made payable to the **Town of Waterford** (unless noted). **PLEASE FILL OUT REGISTRATION FORM COMPLETELY - CODE NUMBERS are essential in securing the right program.**

August 15	Residents – Mail in - Postmarked after August 15	
August 22	Residents – Online Opens	Non-Residents – Mail-in
August 25	Non-Residents – Online Opens	
August 29	Open in-office registration	

Any registrations received before the post mark date of August 15 will be returned.

Mail completed form and payment to: **Recreation and Parks**
15 Rope Ferry Rd.
Waterford, CT 06385

NAME: _____

ADDRESS: _____

PHONE: _____ **E-MAIL:** _____

Waterford Senior Citizen Age is 65

Code #	Program Name	Participants Name	M/F	Date of Birth/Age	Fee
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

Total Fees: _____

In the event a class is full or canceled, we will try to place you in another class.
Otherwise, the registration fee will be refunded.

Allergies: _____

Comments/suggestions: _____

Emergency Contact: Name: _____ **Phone:** _____

In consideration for participating in activities sponsored by the Town Of Waterford, I hereby waive and release the Town Of Waterford, its agents, officers and employees, whether paid or voluntary, from and against any and all claims, suits, actions, damages, liabilities, costs, expenses, and or judgments, including attorney's fees and court costs, which may arise from my participation in activities or any illness or injury resulting there from, either directly or incidentally. I hereby represent that I understand and am familiar with the nature and type of activities in which I participate in. I acknowledge that I will be solely responsible for the furnishing of necessary safeguards and appropriate equipment for protection against injury. Photos taken during programs may be used for promotional purposes. Please notify Recreation and Parks if you do not want picture published. I have read this document, understand, and agree to its terms and conditions. I also give permission to use photo's taken during classes, programs and activities for promotion of myself/and/or child. Please note that all Waterford Recreation and Parks Programs do not fall under state camps or state certified activities and/or programs.

By signing you are agreeing to the terms set above and agree to follow all Town and Recreation and Parks set rules and regulations.

Signature _____ Date: _____

Participant **OR** parent if participant is under 18

Please use the back of the form for additional registrations. Any unsigned registrations or checks are required to be returned. Please review all of the materials before submitting. Email information allows receipts to be sent electronically and class updates to be emailed.