

MIDDLETOWN RECREATION & PARKS DEPARTMENT



47 Academy Avenue, Middletown, New York 10940 • Tel: (845) 346-4180 Fax: (845) 344-2918

PROGRAM REGISTRATION/RELEASE FORM

PROGRAM NAME _____ DATE _____

NAME _____ PHONE _____

ADDRESS _____ AGE _____

I, _____, the undersigned, do hereby waive, any claim which may result from injuries, damages or losses which may be incurred during participation in the above-named program in which I will participate at my own risk. I further certify that I am in good health and free from any medical limitations or restrictions. It is also understood that the Middletown Recreation & Parks Department recommends that all participants carry adequate insurance in case of an accident.

If under age 18, this release must also be signed by a parent or guardian.

(Participant Signature)

(Parent/Guardian Signature)

The Middletown Recreation & Parks Department welcomes your participation in one of our sponsored programs. Each program requires a one-time annual program registration fee which includes secondary accident insurance. If participant is not covered by other insurance, there is a \$100.00 deductible per claim. The registration fees are as follows:

Youth ... \$10.00 for Middletown Residents
 \$15.00 for Non-Middletown Residents
Adults ... \$15.00 for Middletown Residents
(18 & over) \$20.00 for Non-Middletown Residents

AMOUNT PAID: _____ RECEIVED BY: _____

PAID by CASH or CHECK: _____ CHECK #: _____

~~~~~  
RECEIPT

PROGRAM NAME \_\_\_\_\_ DATE \_\_\_\_\_

NAME \_\_\_\_\_ AMOUNT PAID \_\_\_\_\_

PAID by CASH or CHECK \_\_\_\_\_ RECEIVED BY \_\_\_\_\_