

Registration Form

Activity/Sessions/Level _____

Participants Name _____ Fee: _____

Address _____ Town/Zip _____

E-Mail _____ Birthdate _____ Grade _____

Home Phone _____ T-Shirt Size _____

Parent/Guardian Name _____ Cell/Work Phone _____

Emergency Contact _____ Phone(s) _____

Easton Parks and Recreation Participant Waiver

While enrolled in the activities in this brochure and sponsored by Easton Parks and Recreation Commission, the town of Easton and the Parks and Recreation Director and staff are not responsible for any injuries that may occur while participating in or traveling to or from any of the activities. I realize and assume the risk of challenging activities my child may participate in. In the event of an injury, permission is granted to see to it first that first aid and medical attention is provided.

Parent/Guardian Signature _____ Date _____