

ACTIVITY REGISTRATION FORM

PLEASE PRINT AND FILL OUT COMPLETELY

Important: Registration waiver must be signed by participant. If participant is under 18, parent or guardian must sign.
 RECEIPTS REQUESTED BY: EMAIL, OFFICE PICK UP, OR INCLUDE A SELF ADDRESSED STAMPED ENVELOPE WITH YOUR REGISTRATION.



(Adult) Name _____
 Street Address _____
 City _____ State _____ Zip _____
 Home Phone (____) _____ Work Phone (____) _____
 Cell Phone (____) _____ E-mail _____

Registration procedures, see page 10. Request Receipt YES | NO

ACTIVITY CODE	ACTIVITY NAME	FIRST	PARTICIPANT'S NAME LAST	SEX	T-SHIRT SIZE	BIRTH DATE	FEE
SUB TOTAL \$							

CREDIT CARD PAYMENT FORM

Visa MasterCard Discover Card
 Credit Card # _____ Exp. Date _____
 Cardholder's Name _____
 Authorized Signature _____
Please Print

FORM OF PAYMENT

- CASH
- CHECK #
- CREDIT CARD
- CREDIT MEMO
- MONEY ORDER

MORE INFORMATION FOR TOT/YOUTH LEAGUES

YES	NO	NAMES
		1
		2

Do you have any brothers or sisters who will also be playing?

MAIL TO:
 Kent County Parks and Recreation
 1683 New Burton Road
 Dover, DE 19904

WAIVER AND RELEASE OF LIABILITY AND INDEMNITY AGREEMENT

I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THE FULL AGREEMENT ON PAGE 9 OF THIS BROCHURE AND/OR THE COUNTY WEBSITE, AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY AND EXPRESS ASSUMPTION OF RISK AND INDEMNIFICATION. I AM AWARE AND AGREE THAT BY EXECUTING THIS WAIVER AND RELEASE, I AM GIVING UP THE RIGHT TO BRING LEGAL ACTION OR ASSERT A CLAIM AGAINST KENT COUNTY LEVY COURT FOR ITS NEGLIGENCE AND/OR FOR ANY DEFECTIVE PRODUCT THAT MAY BE IN THE FACILITY OR ON ITS PREMISES. BY SIGNING BELOW, I CERTIFY THAT I HAVE READ AND VOLUNTARILY SIGNED THIS AGREEMENT AND THAT NO ORAL REPRESENTATIONS, STATEMENTS OR INDUCEMENTS APART FROM THIS FOREGOING AGREEMENT HAVE BEEN MADE. **PARENT OR LEGAL GUARDIAN MUST SIGN FOR ANY CHILD UNDER 18 YEARS OLD ENTERING A PROGRAM.**

SIGNED: _____

DATE: _____