2011-2012 City of Wayne Parks and Recreation Department
Elementary After School Recreation
Registration and Release of Liability Form

Participant (please print)

Name:_____
Last *First* *Middle*

Birth Date:_____/_____/_____ Gender M F Age:_____ Grade:_____ School:_____

Address:_____ T-shirt Size:_____
No. & Street *City* *Zip* *Please specify adult or youth size*

Parent(s): (please print)

Name #1:_____
Phone #

Name #2:_____
Phone #

PLEASE CHECK THE APPROPRIATE ACTION

A) _____ My child will be picked up from After School Rec activity sites. If a change occurs, a note will be sent notifying Recreation Supervisor of the change.

B) _____ My child will be responsible for his/her own transportation home from After School rec activity sites.

FOLLOWING PEOPLE MAY HAVE AUTHORIZATION TO PICK-UP MY CHILD AFTER SCHOOL RECREATION ACTIVITY SITES (PLEASE INCLUDE PARENTS NAMES):

_____
Name *Phone #* *Name* *Phone #*

_____
Name *Phone #* *Name* *Phone #*

Liability Release, Waiver and Program Consent

In acceptance of participation in the City of Wayne Parks and After School Recreation Program and intending to be legally bound, I do hereby for myself, my heirs, administrators,, representatives, and assignees, waive and forever release the City of Wayne Parks and Recreation Department, its directors, employees, and contractors, from any and all claims for damages or responsibility for any all personal property and effects including but not limited to responsibility for damages to or loss of clothing, equipment, eye glasses, etc. Further, in the event of injury, I do hereby give permission and consent to authorize such first aid and/or medical and/or hospital care or treatment as deemed appropriate.

I have read and agree tot he Waiver and Release above, consent to After School Recreation Program participation and will comply with all rules and regulations set forth by the City of Wayne Parks and Recreation Department

Parent Signature_____ Date:_____

Payment Method

*All fees must be paid in full prior to start of program.
*Make payment to: City of Wayne
*Cash and Credit/Debit Card accepted at the Wayne Community Center
* Mail form to: Wayne Community Center, 4635 Howe Rd. Wayne, Mi 48184

Activitie(s) (Grades 3 & 4 Only!)
(Please check the activities that you would like to participate in) Credit/Debit Card #_____

Activities	**Select Activities Participating In**
Flag Football	_____
Basketball	_____
Dodge Ball	_____
After School Recreation	_____

All (4) four activities: $25.00 _____ **Total Amount Paid: $_____**