

Super Fun Summer Program– Hero In Training—Registration Form

Town of Sandwich – Recreation Department
34 Quaker Meetinghouse Rd., PO Box 1336, Forestdale, MA 02644
Phone: 508-888-4361 Fax: 508-888-5884

Participant Name: _____ Home Phone: _____
First Last

Gender: M F Birthdate: _____ Age: _____ Grade entering fall 2017: _____ School: _____

Allergies: _____ Medications: _____

Primary Parent/Guardian: _____ Home Phone : _____

Address: _____ Cell Phone: _____
Street City Zip

E-mail Address _____

Other Parent/Guardian: _____ Home Phone: _____

Address: (if different): _____ Cell Phone: _____

Why do you want to be a Hero in Training: (For additional spacing candidates may attach separate sheet of paper:)

PARENTAL CONSENT, RELEASE FROM LIABILITY AGREEMENT

he undersigned parent/guardian of _____, a minor or as a participant does hereby consent to his/her or my participation in the voluntary **Town of Sandwich Recreation Department Program(s)** indicated below:

Sandwich Recreation Super Fun Summer Program @ Oakcrest Cove

I also agree to forever release the Town of Sandwich, all their employees, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary athletic or recreation programs of the Town of Sandwich Recreation Department from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to myself, my child or property damage resulting from my or my child's participation in the Town of Sandwich voluntary athletic or recreation programs. I also promise, to indemnify, defend, and hold harmless the Releases against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to me or my child or property damage resulting from my or my child's participation in the Town of Sandwich voluntary athletic or recreation programs. I further affirm that I have read this consent and Release Form and that I understand that my or my child's participation in these programs is voluntary and that my child and I are free to choose not to participate in the Town of Sandwich athletic or recreation programs with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage my child or I may suffer in voluntary Town of Sandwich athletic or recreation programs.

Signature of Parent/Guardian

Date

Relationship to Applicant