



PROGRAM REGISTRATION FORM

PLEASE PRINT CLEARLY, IN BLUE or BLACK INK!

PARENT/GUARDIAN NAME: _____ **DATE:** ____/____/____
(IF APPLICABLE) FULL NAME

ADDRESS: _____
NUMBER and STREET TOWN STATE / ZIP

HOME PHONE: (____)____-____ **WORK PHONE:** (____)____-____ **CELL PHONE:** (____)____-____

E-MAIL ADDRESS: _____ *(ONLY TO BE USED IN THE CASE OF PROGRAM UPDATES OR CANCELLATIONS!)*

EMERGENCY CONTACT*: _____ **PHONE:** (____)____-____
** DIFFERENT FROM THE PARENT/ GUARDIAN* FULL NAME and RELATION

PROGRAM CHOICES

PARTICIPANT 1 NAME: _____ **D.O.B:** ____/____/____

ALLERGIES or MEDICAL INFORMATION: _____

PROGRAM NAME: _____ **DAY:** _____ **TIME:** _____ **FEE:** \$ _____
(IF APPLICABLE) *(IF APPLICABLE)*

PARTICIPANT 2 NAME: _____ **D.O.B:** ____/____/____

ALLERGIES or MEDICAL INFORMATION: _____

PROGRAM NAME: _____ **DAY:** _____ **TIME:** _____ **FEE:** \$ _____
(IF APPLICABLE) *(IF APPLICABLE)*

DOVER PARKS & RECREATION RELEASE and WAIVER: In consideration of his/her participation in this recreation program, the undersigned hereby releases the towns of Dover and Sherborn and the Dover-Sherborn School District and their officers, agents, and employees from any liability for, and waives all claims, suits or causes for action based on or arising from any injury suffered or incurred by the undersigned as a result of or in conjunction with his/her participation in said recreation program. Such waiver and release to be in effect without regard to whether such injury is the result of or caused by the fault of the Towns of Dover and Sherborn or the D-S Regional School District or any of their officers, agents, or employees. This instrument is intended to take effect as a sealed instrument. I further certify that my child is medically fit to participate in the above recreation program.

SIGNATURE *(PARENT/GUARDIAN if applicable)*

PRINTED NAME

DATE

Method of Payment:

CHECK – Made payable to **TOWN OF DOVER**
CASH or **MONEY ORDER**
*** NO CREDIT CARDS TAKEN IN THE OFFICE ***

**Program Registration,
Dover Parks & Recreation Dept.
4 Springdale Avenue
Dover, MA 02030**