

e-mail \_\_\_\_\_

# CITY OF PERRY PARKS & RECREATION DEPARTMENT REGISTRATION FORM

Fill out all information (Please Print)

Child's Name \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_  
Last First Middle

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Home Phone \_\_\_\_\_  
Month/Day/Year

Address \_\_\_\_\_ City & Zip Code \_\_\_\_\_

Mother's Name \_\_\_\_\_ Work Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Work Phone \_\_\_\_\_

Person other than parent for emergency contact \_\_\_\_\_ Phone \_\_\_\_\_

Please list any medical condition that we need to be aware of \_\_\_\_\_

I acknowledge that the Perry Recreation Department does not carry insurance on participants in programs. Being aware of this situation and acknowledge that participation in any activity involves a certain degree of risk or injury, I hereby release and hold harmless the Perry Recreation Department, their Board of Directors, employees, coaches, instructors, officials and volunteers from any and all liability arising out of any injuries suffered by the above said participant during this activity. I give my permission for my child to be taken to the nearest emergency room in the event of an injury. I further agree to abide by the policies and procedures of this department.

**\*\*NOTE:** Refunds will not be issued unless a medical situation occurs prior to forming teams and ordering uniforms.  
The City reserves the right to cancel all programs. Fees will be returned due to lack of participation and/or funding issues.

Signature \_\_\_\_\_ Date \_\_\_\_\_

For office use only

Program \_\_\_\_\_ Age \_\_\_\_\_ Fee pd \_\_\_\_\_ Receipt # \_\_\_\_\_ Shirt Size \_\_\_\_\_ Shorts Size \_\_\_\_\_