



Wooster Parks and Recreation Department Registration Form

Wooster Parks and Recreation Department
 241 S. Bever St.
 Wooster, OH 44691

Make Checks payable to:
 City of Wooster

Office Use Only
 Date: _____
 Ck#: _____
 Rec# _____

Please print and fill out completely.

Participants First Name _____ MI _____ Last Name _____
 _____ E-Mail Address: _____
 Parent/Guardian's Name (If participant is under 18) _____

 Participant's Address _____ City _____ Zip Code _____
 Participant's Date of Birth ____/____/____ Gender: M or F

 Home Phone # _____ Parent's Work Phone # _____ Emergency Phone # _____
 If applicable: Grade: _____ School: _____ T-shirt Size: YL AS AM AL AXL
 (Circle One)

Activity Code #:	Activity Name:	Activity Fee:	Notes:

Do you reside within the corporate limits of the City of Wooster? Yes or No
 If no: Does an adult member of your household work within the corporate limits of the City of Wooster, thus paying City of Wooster Income Tax? Yes (List where: _____ Work Phone _____)

WAIVER FOR PARTICIPANT

I do hereby acknowledge that I, or my child, participate voluntarily in the program(s) sponsored by the Wooster Parks and Recreation Department. I declare that my health and physical condition, or that of my child, is adequate to meet the requirement of the program. I covenant and agree to indemnify and hold harmless the City of Wooster and its representatives and instructors against and from any and all costs, damages, or expense arising from any accident or other occurrence causing injury to myself, my child or any other person or property during participation in this program(s). By registering for, participating in or attending any Wooster Parks and Recreation Department program, you agree to allow publication of any photos taken at any program, event or facility of the City of Wooster Parks and Recreation Department.

 Signature of participant or parent/guardian if under 18 _____
 Date