



PROGRAM REGISTRATION FORM (YOUTH)

Last Name: _____ First Name: _____ Program: _____
 Birthdate: _____ Age: (as of Aug. 1) _____ Grade: _____ Gender: Male Female
 School: _____ Experience (years) _____ SHIRT SIZE: _____ (YS, YM; YL; AS; AM; AL; AXL; AXXL)
 (Shirts tend to shrink - please order accordingly)
 Address: _____
 Mom's Name: _____ Dad's Name: _____
 Mom's email: _____ Dad's email: _____
 Mom's Day Phone: _____ Dad's Day Phone: _____
 Mom's Evening Phone: _____ Dad's Evening Phone: _____

PARENTAL RELEASE AND HOLD HARMLESS AGREEMENT

I, as a parent, pledge to demonstrate good sportsmanship and agree to abide by all Parks & Recreation rules and regulations. Those failing to do so will forfeit their child's participation in the program.

I/we the parent(s)/guardian(s) of the above named player understand there are inherent risks involved with participation in recreation activities and do hereby give permission for him/her to participate in any and all activities during the named program. In consideration of the acceptance of the above entry as a member of the program conducted by the Fulton Parks and Recreation Department, I do hereby waive, release and forever discharge any and all rights and claims for damages, which may hereafter accrue to me against the Parks and Recreation Department of the City of Fulton, and their representatives or successors, and/or arising out of travel to and return from said activities conducted through the year.

Date: _____

Signature of parent/guardian _____

Relationship to participant: _____

VOLUNTEERS

I am interested in volunteering to assist with this program. If I can be of any assistance, please contact me.

Name: _____ Phone: _____

FORMS SHOULD BE RETURNED TO:

**PARKS AND RECREATION DEPT.
P.O. BOX 130
18 East 4th St.
FULTON, MO 65251
PHONE: 573-592-3190
FAX: 573-592-3199
Forms may be placed in Utility Drop**

The City of Fulton Parks & Rec Dept has a scholarship program available and we encourage people of all income levels to participate in our programs.

The Parks & Recreation Dept. also welcomes people of all abilities to participate in its programs We will make all reasonable efforts to include people of all ability or skill levels.

--- FOR OFFICE USE ONLY ---

Registration Fee Paid: \$ _____ Balance Due: \$ _____ Received By: _____

Method of Payment: _____ Check _____ Cash _____ Money Order _____ Scholarship _____ Date: _____