

# REGISTRATION FORM

Last Name		First Name		MI	Age
Address			City	State	Zip
E-mail		Phone		Alt. Phone	
School		Grade		Gender	
Health Problems (Allergies, etc.)				Date of Birth	
Physician's Name			Physician's Phone Number		
Parent's Name (If Minor Child)			Parent's Phone Number		
Emergency Contact			Phone Number		

PROGRAM TITLE	SESSION	FEE
1.		
2.		
3.		

### LIABILITY WAIVER AND RELEASE:

In consideration for being permitted to use Upper Southampton Township's facilities and/or participate in Upper Southampton Township-sponsored programs, I agree, for myself and/or for any minors in my care, to fully and completely release Upper Southampton Township, its officials, employees, boards, departments, agents and affiliated entities from any and all claims, liabilities or actions for any personal injuries to me, personal injuries to minors in my care and/or any loss or damage to my personal property or the personal property of any such minors arising from our use of Upper Southampton Township facilities or participation in Upper Southampton Township Parks and Recreation-sponsored activities and programs.

I certify that to the best of my knowledge, I and/or any minors in my care are healthy enough to participate in the recreation program sponsored by Upper Southampton Township Parks and Recreation Department.

I understand that no health and/or accident insurance is provided by Upper Southampton Township. I also understand and agree, for myself, and/or for any minors in my care, that I am solely responsible at any sole cost and expense for furnishing medical or other insurance to cover any expenses related to any such personal injuries or property damage.

I hereby give Upper Southampton Township Parks and Recreation staff permission to secure emergency medical care for minors in my care who may suffer an injury or illness while in the temporary care of Upper Southampton Township Parks and Recreation representatives.

I agree, for myself and/or for any minors in my care, to comply with all Upper Southampton Township Parks and Recreation rules and regulations, including any rules and regulations governing any programs for which I, and/or any minors in my care, have registered, and understand and agree that noncompliance with any such rules and regulations by me, or any minors in my care, may result in termination of the privilege to use Upper Southampton Parks and Recreation facilities and/or participate in Upper Southampton Township Parks and Recreation-sponsored activities and programs. In the event of such a termination for cause, I understand that I will not be entitled to be reimbursed for any registration fees.

I further agree, for myself and/or for any minors in my care, that I will furnish a certified birth certificate or proof of birth upon request by Upper Southampton Township Parks and Recreation, as may be required for participation in Upper Southampton Township Parks and Recreation activities and programs.

I grant the right to use my/our name, image, photograph and video, including composite or modification, representations in publications, brochures, newsletters, reports, website and any other material relating to Upper Southampton Township Parks and Recreational programs, activities and facilities. I waive the right to inspect or approve versions of my/our image used for publication or the written copy that may be used in connection with the image.

Intending to be legally bound hereby, and with full authority, I acknowledge, agree to and accept the terms of this Liability Waiver and Release on behalf of myself and/or on behalf of any minors in my care.

Participant Name (Print): \_\_\_\_\_ Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If participant is under age 18 Parent/Guardian's Name (Print): \_\_\_\_\_ Parent/Guardian's Signature: \_\_\_\_\_

Return this completed form and payment to: Upper Southampton Township, 913 Willow Street, Southampton, PA 18966. Please direct any questions to Upper Southampton Township Parks and Recreation. Additional forms can be obtained at the Community Center or our website at [Uppersouthamptonparksandrecreation.org](http://Uppersouthamptonparksandrecreation.org). Photos may be taken at any or all Upper Southampton activities and used for promotion of future events. If you do not want your child's picture taken or published, please send an e-mail to the Parks and Recreation Department at [mgilbert@ustwp.org](mailto:mgilbert@ustwp.org).

### CREDIT CARD BILLING INFORMATION

Name (As it appears on card)		Phone Number			
Address		City	State	Zip	
Type of Card Used: (Circle One) <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> American Express <input type="checkbox"/> Discover					
Card Number			Expiration		CVC Code (3-Digit Code)