

ACTIVITY REGISTRATION AND HOLD HARMLESS FORM

		Resident
		Non-Resident
PARTICIPANT'S NAME		
<u>1.</u>	AGE	DOB
<u>2.</u>	AGE	DOB
3.	AGE	DOB
4.	AGE	DOB
ADDRESS	CITY	ZIP
<u>ABBREOU</u>	0111	<u> </u>
HOME PHONE DAD'S BUSINESS PHONE MOM'S BUSINESS PHONE (Phone numbers required if participant is under 18)		
EMERGENCY CONTACT NAME	EMERGENC	Y PHONE
ACTIVITY:		
ACTIVITY DATE:		
HOLD HARMLESS A THE UNDERSIGNED PARTICIPANT and/or his guardian, in const Department of Parks & Recreation providing facilities, instruction, t he has registered does hereby: 1. Assume all risks and responsibilities of possible damage of understand I am to furnish my own insurance in case of in	deration for the Townsl ransportation and/or su r injury involved throug	pervision in the activity for which
 Request permission to participate in the activity with the full knowledge that said activity could result in damage or injury to me. 		
 I will furnish a certified birth certificate or proof of birth of the above names upon request by the Department of Parks & Recreation. 		
 Agree to indemnify and hold harmless the Township and it property damage resulting from my participation in said ac 		ts liability for personal injury or
 Waive the right to dispute all proper charges associated with this registration for a UDP&R program, trip or special event for which this registration form is received. 		
 Agree to reimburse Upper Dublin Township for any and all fees incurred for wrongfully disputing a credit charge. Agree to abide by the published terms and conditions (see current brochure) for registration and/or cancellation of participation in a UDP&R activity. 		

Participant's Signature *:__

*or parent/guardian if participant is under 18

Date:

Trips & Tours/Forms