

REGISTRATION FORM												
PARENT/GUARDIAN	☐ Check here if this is a new address, phone number, or email address											
Last Name *	First Name *			Birthday (mr			nm/dd/yy) *		Email Address *			
Address *	'			City *				State *		ZIP*		
Home Phone *	Work Phone *							Cell Phone *				
ALLERGIES:												
Emergency Contact For participants under 18												
Name	Relatio				nship				Phone 1			
PARTICIPANT INFORMATION												
Participant's Name (Last, First)	(Last, First)			Birthday (mm/dd/ Grac			Program Name		Fees		5	
PAYMENT Total Amount Due												
Name on Card		(Credit Card	Number					Security Code		Expiration Date	
Payer Address (if different from above)		(City						State		ZIP	
Cardholder Signature Date												
☐ Visa ☐ Check or Money Order ☐ MasterCard ☐ Cash ☐ Cash ☐ PLEASE MAKE CHECKS OR M PEABODY RECREAT								OR MO	NEY ORDERS PAYABLE TO: ON DEPARTMENT			
EMERGENCY RELEASE WAIVER I give my permission for my child to take part in all activities and field trips related to the Peabody Recreation, Parks & Forestry Department. I, the undersigned parent/guardian of this applicant, a minor, do hereby authorize the program directors and/or instructors as Agents for the undersigned to consent to Medical, Surgical or Dental Examination, treatments, etc. In addition, I, for myself and/or the above minor, hereby release the City of Peabody, its facilities or employees from any and all claims for personal injuries, which may result from the usual involvement of these activities. I agree that pictures taken during the program hours may be used for future promotional purposes.												

3 WAYS TO REGISTER!

Parent/Guardian Signature

Date _