

1. Registration Form

Household Information								
Primary Guardian First Name				Primary Guardian Last Name				
Address				Please E-Mail Receipt to the E-Mail Below				
City, State, Zip				Sex		E-Mail		
Home Phone ()				Work Phone ()				
Emergency Contact				Relationship				
Participant Information								
Participant First Name				Participant Last Name				
Date of Birth				Grade Completing		Sex		
Allergies				Medication/Other				
Registration Information								
Program Choices	Program Name	Day(s)	Date	Time	Location	Cost		
Programs fill up quickly! We highly recommend including an alternate choice or choices where applicable!								
1	1st Choice							
	2nd Choice							
2	1st Choice							
	2nd Choice							
3	1st Choice							
	2nd Choice							
Pool Passes <input type="checkbox"/> Yearly	Pass Type <input type="checkbox"/> Individual <input type="checkbox"/> Household	Indicate Names of ALL Family Members (Ages 2 & Up) Who Require Passes and Reside at the Above Address:					TOTAL	
Waiver								
Being of full age and in consideration of my (my child's) participation in this class, I do hereby release and forever discharge the Town of Glastonbury, and their agents and employees, their representatives, successors, and assignees, from all claims arising out of any and all personal injuries, damages, expenses, and any loss or damage whatsoever resulting or which may result from participation in this program.								
Signature:				Date:				
Payment								
Complete a SEPARATE form for each person and sign the waiver. Please PRINT. You may copy this form or print a copy from our website at www.glastonbury-ct.gov								
Mail your Form, Payment, Business Size Self Addressed STAMPED envelope (or include e-mail address for e-mail confirmation) to: Parks and Recreation, Program Registration, PO Box 6523, Glastonbury, CT 06033								
Check		Write a SEPARATE CHECK for each program. Make checks payable to "Town of Glastonbury"						
<input type="checkbox"/> Mastercard		Name on Card						
<input type="checkbox"/> Visa		Credit Card Number				Expiration		
<input type="checkbox"/> Discover						Code		