

## Raynham Park and Recreation Department General Registration Form

**REGISTRATION:** All programs should be registered for in advance and will be accepted on a first come, first serve basis. We accept payments in the form of money order or check. **Cash payments will not be accepted.** All checks should be made payable to the "Town of Raynham". There is a \$25.00 fee for all returned checks. For your convenience, fill out the registration form and mail it in or bring it the Park and Recreation Office M-F, 8:30AM-1:30PM. A mailbox is available next to the door if the office is unattended.

**Raynham Park and Recreation Department  
2254 King Philip Street  
Raynham, MA 02767**

**Tel: 508-824-2743**

**Fax: 508-824-2729**

**www.raynhamrec.com**

**REMINDER:** No confirmation calls will be made and no confirmation letters will be sent. Consider yourself in the program for which you have registered unless you are notified otherwise.

**Program:** \_\_\_\_\_

**Participant's Name:** \_\_\_\_\_

**Grade (if applicable):** \_\_\_\_\_ **D.O.B.:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ **Parent D.O.B** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**AMOUNT DUE:** \_\_\_\_\_

*I, the parent/guardian of the registrant, agree that I and the registrant will abide by the rules of the Raynham Park and Recreation Department, its affiliated organizations, sponsors and staff. Recognizing the possibility of physical injury associated with this activity and in consideration for the Raynham Park and Recreation Department accepting the registrant for this program, I hereby release, discharge and/or otherwise indemnify the Raynham Park and Recreation Department, its affiliated organizations, sponsor's staff, their employees and associated personnel, including the owners of the facilities utilized, against any claim by or on behalf of the registrant as a result of the registrant's participation in the program and /or being transported to or from the same, which transportation I hereby authorize.*

\_\_\_\_\_  
*Participant/ Parent/Guardian*

\_\_\_\_\_  
*Date*