REGISTRATION FORM

hild's Last Name: First Name:		
		T-Shirt Size:
Father's Name:		
		ne:
Mother's Name:		
Address:		
Home Phone:	Work Ph	hone:
Are there any medical illnesses or injuries	that we should know about fo	or the child's protection and yours?
In case of an emergency notify:		Phone #:
	WAIVER AND RELEASE OF	F LIABILITY
NOT RESPONSIBLE FOR ANY INJURY (PRACTICING, OR IN ANY OTHER WAY	OR LOSS OF PROPERTY TO A INVOLVED IN THE BREWER SOEVER, INCLUDING ORDIN	REWER PARKS AND RECREATION DEPARTMENT IS ANY PERSON SUFFERED WHILE PLAYING, R PARKS AND RECREATION DEPARTMENT'S NARY NEGLIGENCE ON THE PART OF THE BREWER DYEES.
and covenant not-to-sue on behalf of myse Brewer Parks and Recreation Dept., and any resulting from any negligence on the part injury, or wrongful death, arising as a result of thereto, wherever, whenever, or however the	of the Brewer Parks and Recre of my engaging in or receiving ir same may occur. I hereby volur on Dept. and any of their employ	in (if said child is under 18 years of age), I hereby release named child if under 18 years of age the City of Brewer, or agents, from any and all present and future claims reation Dept. or others listed for property damage, personal instruction in the programs or any activities incidental intarily waive any and all claims resulting from any oyees, instructors, or agents, both present and future, that
involves certain risks, including but not limit damage, and serious injury to virtually all bo may be inadequate to prevent serious injury. neck injury. In addition, I understand that pa thereto, including, but not limited to, travel to medical assistance, and the possible reckless	ed to, death, serious neck and sp nes, joints, muscles, and internal I further understand that this pro- articipation in the Brewer Parks a o and from the site of the activity conduct of other participants. I	stress and physical contact. I understand that the program binal injuries resulting in complete or partial paralysis, brain I organs, and that equipment provided for my protection rogram involves a particular high risk of knee, head, and and Recreation programs involve activities incidental y, participation at sites that may be remote from available am voluntarily participating in this activity with knowledge of property damage, personal injury or death.
I further agree to indemnify and hold harmless the City of Brewer, the Brewer Parks and Recreation Department, and others listed of an and all claims arising as a result of my or the above named child engaging in or receiving instruction in programs or any activities incidental thereto, wherever, or however the same may occur. I further agree that you may use my child's likeness, name and biological facts which may have been provided to you, including advertising and promotion.		
		nitted by laws of the State of Maine and agree that if any force and effect. I further agree that the venue for any legal
freely signing this agreement. I have read thi	is form and fully understand that	the child is under 18 years of age, am of legal age and am t by signing this form, I am giving up legal rights and or rks and Recreation Dept. or any of the parties listed.