

**KENT PARK AND RECREATION COMMISSION  
PROGRAM REGISTRATION FORM**

ACTIVITY \_\_\_\_\_

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ GRADE \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Street and/or P.O. Box Town Zip

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

EMERGENCY CONTACT (OTHER THAN PARENT) \_\_\_\_\_

CONTACT'S PHONE \_\_\_\_\_

NOTE ANY MEDICAL/PHYSICAL CONDITION(S) COACH SHOULD BE AWARE OF:

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**MEDICAL AUTHORIZATION**

I am the parent/guardian of the above child, a minor. During the time that the minor is engaged in any activity of the Kent Park and Recreation Commission, I authorize such emergency medical care as may be necessary for the minor.

Preferred Hospital \_\_\_\_\_

**PHOTO RELEASE**

I give permission for my child's picture to appear on the Kent CT Park and Recreation website while engaged in Kent Park and Recreation \_\_\_ yes \_\_\_ no

\_\_\_\_\_  
Parent/Guardian signature Date

[The Town of Kent, Kent Park and Recreation Commission will charge a \$30 fee for any checks returned by the participant's bank. Thank you.]

**PLEASE COMPLETE WAIVER FORM ON BACK SIDE**

\*\*\*\*\* for office use only\*\*\*\*\*  
Cash \_\_\_\_\_ Check \_\_\_\_\_ Date Rec'd \_\_\_\_\_ Rec'd by \_\_\_\_\_

**Town of Kent Waiver, Hold Harmless Agreement and Release of Liability**

In consideration for the privilege of participating in martial arts class at the Kent Community House, the undersigned hereby agrees that:

1. I understand that there are inherent risks involved in martial arts class, including the risk of serious physical injury or death. I fully assume all risks associated with martial arts class even if due to the negligence of The Town of Kent, and its agents, servants or employees, including but not limited to:

I, for myself and for my heirs, assigns, successors, executors, administrators, and legal representatives, agree to defend, indemnify and hold harmless The Town of Kent, its agents, servants or employees from any and all claims, suits or demands by anyone arising from my use of the Town of Kent facilities and equipment including claims of negligence on the part of The Town of Kent and its agents, servants, or employees.

2. I, for myself and for my heirs, assigns, successors, executors, administrators, and legal representatives, hereby release and agree that I will not sue The Town of Kent and its agents, servants or employees for money damages for personal injury sustained by me while using the Town of Kent facilities and equipment even if due to the negligence of The Town of Kent and its agents, servants or employees.

I have read this waiver, hold harmless agreement and release of liability and fully understand its terms. I further understand that by signing this agreement that I am giving up substantial legal rights. I have not been induced to sign this agreement by any promise or representation, and I sign it voluntarily and of my own free will.

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Participant's signature	Participant's printed name	Date
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**Consent of Parent or Guardian**

This is to certify that I, as parent or guardian with legal responsibility for this participant, do hereby consent and agree to his or her release as set forth above, and for myself, my heirs, assigns, successors, executors, administrator and legal representatives, agree to defend, indemnify and hold harmless The Town of Kent and its agents, servants or employees from any and all claims, suits or demands by anyone arising from said participant's use of the Town of Kent facilities and equipment, including claims of negligence on the part of The Town of Kent, and its agents, servants or employees.

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Parent/Guardian's signature	Parent/Guardian's printed name	Date
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