

## REGISTRATION FORM

Mail registration form with credit card info or check payable to *SWPRD, 5475 Maxwellton Rd., Langley, WA 98260*, or fax w/ credit card info to (360)221-7323.  
 You can also register online at [www.swparks.org](http://www.swparks.org) with no extra fees!

Participant Information	Name (First, Last)	Phone	Alt. Phone	Birthdate (Youth)	Age	Grade
	Address	City	State	Zip	Gender	
	Email(s)	Check here to receive our e-newsletter [ ]	Height (Basketball)	Circle your shirt size (if applicable)	Youth: S M L Adult: S M L XL 2X 3X	
	Please list any health, behavioral or medical concerns.					
	Parent/Legal Guardian (Required for youth only)	Phone(s)		Relationship to participant		
	Parent/Legal Guardian (Required for youth only)	Phone(s)		Relationship to participant		
	Emergency Contact (Other than those listed above)	Phone(s)		Relationship to participant	Authorized to pick up child: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Program Information	<b>Program Title</b>	<b>Date or Session</b>	<b>Start Time</b>	<b>Fee</b>
				\$
				\$
				\$
				\$
	Please consider donating to our youth scholarship fund and add to your total. Your donation: \$_____			<b>Total</b>

<b>Waiver / Release of Liability</b>	<b>Credit Card Payment (Visa or MasterCard)</b>	
I agree to hold harmless the South Whidbey Parks & Recreation District, Island County, and South Whidbey School District, and their officials, employees and agents for any and all claims for personal injury and damage in which damage and injury is or appears to be proximately caused by my participation or the participation of the child for whom I am responsible in this recreation program. Furthermore, I hereby consent that images (photographs, video recordings, etc.) of me or my child engaged in above activities may be used for promotional purposes.	Credit Card #	
	Name on Card	
	Exp. Date	3 digit code on back of card
Signature	Date	Signature

OFFICE USE ONLY	Method	Rec'd By	Date	Amount	Receipt #
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