

Mail-In Registration Form

HOUSEHOLD INFORMATION (please print clearly)

Parent/Guardian 1 _____ Primary Phone () _____ Secondary Phone () _____
 Parent/Guardian 2 _____ Primary Phone () _____ Secondary Phone () _____
 Address _____ City _____ Zip Code _____
 E-mail Address _____
 Emergency Contact (other than above listed) _____ Phone () _____

WAIVER/RELEASE

I, the undersigned do hereby agree to allow the individual named herein to participate in the activities indicated. I am aware and understand there may be potential risk inherent with participation in any recreation activity, and that the Fond du Lac School District and City of Fond du Lac does not provide accident insurance and cannot assume responsibility for injury to any participants in the recreation programs. I further understand the eligibility requirements for the program as stated in the department brochure and that there is no transfer of fees allowed or refunds given unless my spot can be filled or the department changes a class. I also agree to allow publication of any photos taken of me or the participant(s) at any program, event, or facility of the Fond du Lac School District Community Education & Recreation Department.

Participant/Parent/Guardian Signature

Date

Registration is **NOT VALID** without signed waiver/release.

PARTICIPANT INFORMATION

Participant Name	Date of Birth	Gender	Grade (entering)	Program Title & Session	Fee
	/ /				\$
	/ /				\$
	/ /				\$
	/ /				\$
	/ /				\$

T-Shirt Size [if applicable] **Youth** Small Medium Large **Adult** Small Medium Large X - Large

Special Information [i.e. medical, physical, allergies, etc.]: _____

MAIL FORM & PAYMENT TO THE COMMUNITY EDUCATION & RECREATION DEPARTMENT

Payment is due in full at time of registration, checks payable to: FdL Rec. Dept. **NO PHONE REGISTRATIONS ACCEPTED.**

TOTAL FEE: \$	
<input type="checkbox"/>	Cash
<input type="checkbox"/>	Check #

MARK YOUR CALENDAR! We do not mail confirmations, please provide your e-mail address if you wish to receive confirmation. The Community Ed & Rec. Dept. will contact you with any issues for the program(s) for which you registered, otherwise, you may assume your registration has been processed as requested.

OFFICE USE ONLY

Date Processed _____ Initials _____