

City of Olean Youth & Recreation Summer Program Registration

PART 1 – REGISTRATION

1. Child's Name _____
Age _____ School _____
Shirt Size (please circle): 10-12 14-16 A-Small A-Med A-Large A-XL

2. Child's Name _____
Age _____ School _____
Shirt Size (please circle): 10-12 14-16 A-Small A-Med A-Large A-XL

3. Child's Name _____
Age _____ School _____
Shirt Size (please circle): 10-12 14-16 A-Small A-Med A-Large A-XL

***If registering more than 3 children, please use the back of this form.**

PART II – PAYMENT

Resident Total # of Children _____ x \$15 = \$ _____ Cash _____ Check _____
Non-Resident Total # of Children _____ x \$25 = \$ _____ Cash _____ Check _____

PART III – PARENT/GUARDIAN INFORMATION

Parent/Legal Guardian Name(s) _____
Address _____ Phone (Daytime) _____
City _____ State _____ Zip _____ (Cell) _____

*If you are the person responsible for the child during program hours, please fill out:
Name of person responsible _____ (babysitter, grandparent, etc.)
Phone at which they may be reached during program hours _____.

**Emergency contact person _____
Relation to Child _____ Phone _____

PART IV – WAIVER AND SIGNATURE

I affirm that all information given concerning addresses and phone numbers are true. I do not hold the City of Olean responsible for any lost or stolen items.

Release for Participation

My child, who will participate in the City of Olean Youth & Recreation Summer Youth Recreation Program, hereby has my permission to participate in any and all of the activities of the program during the current season. I assume all risks and hazards incidental to the conduct of the activities and transportation to and from the activities. I do further release, absolve and indemnify and hold harmless the City of Olean, its officers and all other participants in the program. I also do further hereby release, absolve, indemnify and hold harmless the City of Olean and its representatives from any and all public liability or property damage claims arising thereby. I likewise release from responsibility any person transporting my child to and from activities. Furthermore, I understand the City of Olean Youth & Recreation Department provides supervision of children during scheduled hours of activities/programs only.

Signature of Parent _____
Date _____

