

UDP&R PROGRAM REGISTRATION FORM

Participant Name: _____ **Upper Dublin Resident** **Non-Resident**
Address: _____ **Date of Birth:** _____
City: _____ **State:** _____ **Zip:** _____ **Email address (required):** _____
Phone: (c): _____ **Special medical/allergy/needs:** _____
(h): _____ **(w):** _____ **Emergency Contact Name:** _____
Male **Female** **Non-binary** **Other**
Prefer not to answer **Emergency Contact Number:** _____
IF PARTICIPANT IS UNDER 18:
AGE: _____ **GRADE AS OF REGISTRATION:** _____

| Activity # | Program Name | Date(s) | Time | T-Shirt Size | Fee |
|------------|--------------|---------|------|--------------|-----|
| | | | | | \$ |
| | | | | | \$ |

| | |
|--|--------------------------------------|
| PAYMENT METHOD: | |
| <input type="checkbox"/> Check #: _____ | <input type="checkbox"/> Cash |
| Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover | |
| Name on card (print): _____ | |
| Card Number: _____ | |
| Expiration Date: _____ | VIN # _____ |

| | | |
|-----------------------------|--------------------|-----------------|
| Total Payment \$ | | |
| FOR OFFICE USE ONLY: | | |
| Mail _____ | Phone _____ | Window _____ |
| Date _____ | Initials _____ | Receipt # _____ |
| Date _____ | ReCPro: _____ | |
| Date: _____ | Verified by: _____ | |

Participant's Signature: _____ **Date:** _____
Signature confirms that participant has read & agrees to UDP&R Hold Harmless Agreement (Parent or guardian must sign for participant under age 18.)

HOLD HARMLESS AGREEMENT

THE UNDERSIGNED PARTICIPANT and/or his guardian, in consideration for the Township of Upper Dublin through its Department of Parks & Recreation providing facilities, instruction, transportation and/or supervision in the activity for which he has registered does hereby:

1. Assume all risks and responsibilities of possible damage or injury involved through participation in said activity. I understand I am to furnish my own insurance in case of injury.
2. Request permission to participate in the activity with the full knowledge that said activity could result in damage or injury to me.
3. I will furnish a certified birth certificate or proof of birth of the above names upon request by the Department of Parks & Recreation.
4. Agree to indemnify and hold harmless the Township and its department and agents liability for personal injury or property damage resulting from my participation in said activity.
5. Waive the right to dispute all proper charges associated with this registration for a UDP&R program, trip or special event for which this registration form is received.
6. Agree to reimburse Upper Dublin Township for any and all fees incurred for wrongfully disputing a credit charge.
7. Agree to abide by the published terms and conditions (see current brochure) for registration and/or cancellation of participation in a UDP&R activity.
8. Agree to allow Upper Dublin Township to use any photos taken at an activity for future publications.

UDP&R eNEWS

Please check the list(s) you would like to sign up for:

- Parks & Recreation (General)** **Dog Parks** **Concerts**
Upper Dublin C.A.R.E.S. **Upper Dublin Township Community Pool**