

**2016 WINTER PROGRAM – SATURDAY MORNING GYM
REGISTRATION FORM**

Please Use A Separate Registration Sheet For Each Child

The Boxborough Recreation Commission is once again sponsoring a Winter Recreation Program for all children in grades K-6. This is an in-house instructional and fun program that allows the children to engage in a combination of soccer, basketball, floor hockey and assorted gymnasium games. The Program will be held Saturdays in the Blanchard School Gymnasium beginning January 9, 2016 and will continue through March 26, 2016. There will not be any sessions held February 13th and 20th due to school vacation:

- _____ 9:00 – 10:25 ALL SPORTS (variety) **K – 3 ONLY**
- _____ 10:30 – 11:55 ALL SPORTS (variety) **GRADES 4 - 6 ONLY**

Please check the above session(s) your child is attending and pay according to the following:

Registration Fee is \$50 per child/per program with a family maximum of \$100
Please check the appropriate box above and submit payment with registration form
There must be a minimum of 10 registrants with a maximum of 30 registrants per session.

Registration for the Winter Program is by mail only. Registrations should be mailed to the Recreation Commission, Boxborough Town Hall, 29 Middle Road, Boxborough, MA 01719. **Registration deadline is January 4, 2016.** Do not return this form to the School. **Checks should be made payable to the Town of Boxborough** and returned with the registration form. Please put the child's name on the check. *Scholarships based upon need are available upon request to a Recreation Commission Program contact: Kevin Lehner at kevinlehner@verizon.net*

The gymnasium can be cold on weekends. Please plan accordingly. Children must wear sneakers in the gym; however, it is requested that the sneakers be carried and put on at the school in order to prevent tracking of dirt and snow into the school.

It is essential that all children be picked up promptly at the end of their session. If you are unable to pick up your child at the assigned time, be sure to make other arrangements.

Participant's Name *[Please print clearly]* _____ Birthdate: _____ Grade: _____

Address: _____ Home Phone# _____ E-mail address: _____

Emergency Name: _____ Emergency Phone#: _____

Medical Contact Information: (Physician name, telephone #; relevant medical information, i.e. allergies, **Special Needs**)

AUTHORIZATION/WAIVERS:

(There are two statements that must be completed. *Please see reverse also*)

Medical authorization & physical condition identification:

I authorize whatever medical care may be necessary in the event of an emergency. I acknowledge that insurance is not provided by the Town of Boxborough, the Recreation Commission, its staff or volunteers for this program. I accept the responsibility for payment of any medical expense.

Parent/Legal Guardian (print & sign)

Date

For Office Use Only:
Amount Paid \$ _____

Waiver: Program Instructor/Director Gift Certificate/voucher Scholarship

Authorization by: _____

PLEASE COMPLETE THE WAIVER BELOW

RECREATIONAL AND VOLUNTEERS ACTIVITIES RELEASE AGREEMENT

I/We, the undersigned

(participant, father, mother or guardian - *circle or insert legal relationship to participant, e.g., "participant" "parent," "guardian"*)

of _____ a minor, do hereby consent to my child's participation in
(insert name of child, if a minor)

(name of activity)

I/We also agree to forever RELEASE the Town, a municipal corporation of the Commonwealth of Massachusetts, and/or all of their employees, officers, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary athletic or recreation programs of the Town, ("the Releasees") from any and all claims, actions, rights of action and causes of action, damages, costs, loss of services, expenses, compensation and attorneys' fees that may have arisen in the past, or may arise in the future, directly or indirectly, from known and unknown personal injuries to my child or property damage resulting from my child's participation in the said Town and/or Public School's voluntary athletic or recreation programs which I/we may now or hereafter have as the parent(s) or guardian(s) of said minor child and which said minor child has or hereafter may acquire, either before or after reaching majority.

I/We also promise, to INDEMNIFY, REIMBURSE, DEFEND, and HOLD HARMLESS the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, including damages, costs and attorneys' fees, arising from personal injuries to my child or property damage resulting from my child's participation in the Town and/or Public School's voluntary athletic or recreation programs or administration of first aid.

I/We further affirm that I/we have read this Parental Consent, Release from Liability and Indemnity Agreement, and that I/we understand the contents of this Agreement. I/We understand that participation in these programs is voluntary and that the participant is free to choose not to participate in said programs. By signing this Agreement, I/we affirm that I/we have decided to allow my child to participate in the Town and/or Public School's athletic or recreation programs with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage my child or I/we may suffer in voluntary Town and/or Public School's athletic or recreation programs.

Signed:

Participant's or Parent/Legal Guardian's Signature
(Parent/Guardian must sign if participant is a minor)

Dated: _____

Participant's Name [Please print clearly]

Please use a separate application for each participant