MANALAPAN PARKS & RECREATION
REGISTRATION FORM
120 ROUTE 522
MANALAPAN, NJ. 07726

MANALAPAN PROJECT REGISTRATION FORM
PARTICIPANTS MUST BE 12 YEARS OR OLDER!

This is a free program.
Transportation to and from volunteer projects is the responsibility of the registrant.

Participant Name: Last _____ **First**_____

Address: _____ **Town**_____

Birth date _____ **Age** _____ **Gender: M/F** **Grade** _____

Home Phone: _____ **Emergency Phone:** _____

E-Mail: _____
(Email address mandatory for this program)
Alternate email (if available) _____

Participant restrictions or limitations _____

Parent/Guardian willing to help (when available)?

Name: _____ **Contact Phone:** _____

ACCIDENT INSURANCE

In order to additionally protect participants in our Recreation programs, Manalapan Township maintains a "LIMITED FORM OF CONTRACT" accident insurance for sponsored programs (with the exception of skiing, boxing, lacrosse and ice hockey), which is intended to be only supplemental to your own personal health insurance. This coverage has restrictions and limitations. All participants are encouraged to carry their own personal health insurance to adequately be protected in case of emergency. Manalapan Township carries **NO** health insurance coverage for personal injury while participating on sponsored ski trips or any of the excluded categories.

PROGRAM ACCIDENT INSURANCE/DISCLOSURE STATEMENT

Programs sponsored by Manalapan Parks and Recreation offer an opportunity for participants to explore and test the limits of their abilities. Every effort is made by staff and volunteers to protect the safety of all participants. Your participation in the Manalapan Recreation Program is voluntary and we assume no responsibility for any injuries or accidents that may occur.

MEDICAL ATTENTION

I hereby authorize the attending physician to administer treatment on behalf of the above minor participant in the event of an emergency. I also assume financial responsibility for any medical treatment for my child not covered under the Township's accident insurance policy.

ALL FEES ARE NON-REFUNDABLE

I hereby consent to allow my child to participate in Manalapan Recreation sponsored activities.

Rec'd

_____ Date _____ By _____

Signature Parent/Guardian