



SUMMER 2019 NORWELL RECREATION REGISTRATION FORM
PLEASE PRINT ALL INFORMATION "ONE FORM PER PERSON"
PLEASE MAKE CHECKS PAYABLE TO: Town of Norwell
RETURN TO: Town of Norwell Recreation,
P.O. Box 295, 345 Main St. Norwell, MA 02061



PARTICIPANT NAME _____
ADDRESS _____

Street _____ **Town** _____ **State** _____ **Zip** _____
Home Phone (____) _____ **Parent's Name(s)** _____
Cell Phone 1 (____) _____ **Cell Phone 2** (____) _____
Work Phone (____) _____ **Gender: M F**
Email address _____

AGE _____ **DATE OF BIRTH** ____/____/____ **Entering GRADE ('19)** _____

EMERGENCY CONTACT If parent cannot be reached:

Name _____ **Phone** (____) _____ **Relationship** _____

Please note allergies, medications, spec. needs _____

I consent to participation in Town of Norwell recreation programs ("The Town"). I agree to forever release The Town, their employees, agents, volunteers and any and all individuals and organizations assisting or participating in programs from any and all claims, rights of action and causes of action that may have arisen in the past or future, directly or indirectly, from personal injuries to myself or property damage resulting in The Town's programs. I promise to indemnify, defend, and hold harmless the Releasees against all legal claims and proceedings that may have been asserted in the past or in the future, directly or indirectly, arising from personal injuries to myself or property damage resulting from participation in The Town's recreation programs. I further affirm that I have read and understand the contents of this form. I give permission for medical treatment to be given if necessary and grant permission for use of photographs to be taken and used in promotional material.

Signature _____ **Date:** _____
Adult Participant or Parent (if participant under 18)

PROGRAM CODE #: _____ **PROGRAM CODE #:** _____
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Shirt Size for REC TRACK/NFL FLAG: YOUTH S__ M__ L__ ADULT S__ M__ L__ XL__



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