Red Lion Recreation - Program Registration Form

Participant's Name							
	(L	ast Name)	(First Name)				
Parent/Legal Guardian (if u	nder age	18)					
Address							
(Street)			(C	City)	(State)	(Zip)	
Municipality: Red Lion Bor	ough	Other					
Email Address			Phon	ne () ~			
				Home ♯		Cell#	
Participant's Name	Grade	Birthdate	Gender	Program Na	me/Location	Fee	
Size for shirt: CS CM CL AS AM AL AXL AXXL TOTAL \$							
Emergency Contact			_ Phone ()			
Please list allergies, medications or dietary information:							
Waiver of Liability: I, the above-named candidate, hereby waive any claim for bodily							
injury or property damage against Red Lion Recreation, its agents, employees and/or							
volunteers while a participant in the above-named activities.							
Signature of Participant (Or parent/guardian if under age				8)	Date		
	.9			- 1			
Registration forms can be mailed to:				Or dropped off at:			
Red Lion Recreation				Red Lion Community Building			
P. O. Box 158				190 S. Charles Stre			
Red Lion, PA 17356	-	Red Lion, PA 17356					
Feel free to use the drop box if the doors are locked!							

Cash, credit and checks accepted. Make checks payable to "Red Lion Recreation".

Call the Recreation Director at 717-244-6896 for more information.