POTTSGROVE RECREATION

MAKING OUR COMMUNITY A BETTER PLACE!

1301 Kauffman Road Pottstown, PA 19464 Phone: 484.624.2507 www.pottsgroverec.com

Thank you for registering through the Pottsgrove Recreation Board for the Fall 2019 swim class session at the Pottstown YMCA. **There is no transportation provided and a Parent/Guardian must stay at the time of classes**. Classes will run from November 2 to December 21, 11am-11:45am. Please fill out this form completely and return it with the $45 registration fee. Families with multiple children will need to fill out a form for each child. Please send all paperwork and $45 to the above address c/o Pam Ball.

Child's Name_____ Child's age_____ Birthday _____
Last Name First Name

Address_____

Email address_____Residency Township (circle one) Lower Upper West

Legal Guardian's Names_____ Home phone_____

Cell #1_____ Cell #2_____

In case of emergency, parents are the first contact. If parents cannot be reached please contact the person below,

Emergency Contact:

#1 _____ Relationship_____ Phone: _____

#2 _____ Relationship_____ Phone: _____

Medical Information: *All medical information is kept strictly confidential. It is extremely important that we have all necessary medical information concerning your child. This also includes any learning disabilities.*

Family Physician_____ Office Phone: _____

Allergies? YES NO *explain:* _____

Medical Conditions? YES NO explain*:* _____ _____

Medications? YES NO *explain:* _____

Does your child require accommodations due to health, physical, social, cognitive and/or behavioral needs? YES N0

HOLD HARMLESS AGREEMENT

Any participant and/or guardian do hereby agree to the following:

1. To 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. Understand and request permission to participate in the above activity with the full knowledge that the said activity could result in damage or injury to participant.
2. Agree to indemnify and hold harmless the Pottsgrove Recreation Board, its departments and agents from liability for personal injury or property damage resulting from my participation in said activity.
3. Waive the right to dispute all proper charges once he/she/they have registered and/or participated in the PRB program for which this registration form is received
4. Agree to allow Pottsgrove Recreation Board to use any photos taken at an activity for future publications.
5. By providing my email address, I agree to receive emails from Pottsgrove Recreation Board. Email will not be shared with any other entities.

SIGNATURE: _____Date_____

Signature confirms that participant has read and agrees to Pottsgrove Recreation Board Hold Harmless Agreement. (Parent or guardian sign for participant under 18)