

REGISTRATION FORM

RETURN THIS FORM OR A FAX ALONG WITH YOUR REGISTRATION FEE TO:

HANAHAN RECREATION DEPT. 3100 MABELINE RD., HANAHAN, SC 29410

LAST FIRST MIDDLE

PARTICIPANT _____ AGE _____ BIRTHDATE _____ SEX (F / M)

ADDRESS _____ CITY _____

MOTHERS NAME _____ WORK/ CELL _____ HOME _____

FATHERS NAME _____ WORK/CELL _____ HOME _____

EMAIL ADDRESS _____

EMERGENCY CONTACT _____ PHONE _____

ACTIVITY APPLYING FOR _____

SCHOOL _____ GRADE _____

ARE YOU INSURED? _____ YES _____ NO IF SO WHAT COMPANY? _____

MEDICAL INFORMATION _____

SHIRT SIZE YS (5/ 6) YM (7/8) YL (10/12) AS (14 / 16)

AM AL AXL A2XL

WAIVER FOR PARTICIPANT: IN CONSIDERATION OF YOUR ACCEPTING MY ENTRY, I HEREBY, FOR MYSELF, MY CHILD, MY HEIRS, EXECUTORS AND ADMINISTRATORS, WAIVER AND RELEASE ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES I OR MY CHILD MAY HAVE AGAINST THE HANAHAN RECREATION DEPT. AND ITS REPRESENTATIVES, SUCCESSORS AND ASSIGNS FOR ANY AND ALL INJURIES SUFFERED BY MYSELF OR MY CHILD AT ANY ACTIVITY SPONSORED BY THESE GROUPS.

PARENT/GUARDIAN'S/APPLICANT'S SIGNATURE _____ DATE _____

REFUNDS WILL NOT BE GRANTED ONCE THE CHILD IS PLACED ON A TEAM. LATE REGISTRATION FEE \$5.00 PER CHILD