**Limestone Recreation Department Registration Form**

Name of Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year: 202\_\_

Participant’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Phone Numbers \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, the above-named participant, knowing that participation in any of these programs may cause serious injury or even death to the participants. I assume all risk incidental to such participation and hereby release, absolve, indemnify, and agree to hold blameless, the Limestone Recreation Department, the organizers, sponsor, participants, supervisors, volunteers, or the person organization responsible for transportation during any programs. My signature below is verification that I understand and agree to the contents of this paragraph.

PARTICIPANT SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ YES, IT IS OK TO USE PHOTOGRAPHS OF ME FOR THE NEWSPAPER AND THE LIMESTONE RECREATION DEPARTMENT ADVERTISING, INCLUDING FACEBOOK.

\_\_\_\_\_ NO, I DO NOT WANT PHOTOGRAPHS OF MYSELF RELEASED