

Litchfield Parks & Recreation Department

TEL: (860) 567-7569 ----- FAX: (860) 567-7573

Standard Program Form & Hold Harmless Agreement

Prior to participating in any program or event (including trips) sponsored by the Town of Litchfield Parks & Recreation Dept., the following form must be completed and placed on file with the Parks & Recreation Dept. No Party shall be able to participate in a town program until such time as payment has been received and the following hold harmless agreement has been properly executed.

PLEASE PRINT

<u>Student Name</u>	<u>Age/Grade</u>	<u>Program</u>	<u>Times</u>	<u>Fee</u>

FATHER'S NAME: _____
WORK PHONE: _____ (CELL) _____
EMAIL: _____

MOTHER'S NAME: _____
WORK PHONE: _____ (CELL) _____
EMAIL: _____

HOME PHONE: _____
ADDRESS: _____
CITY: _____ ST & ZIP: _____

EMERGENCY CONTACT: _____
PHONE: _____ (CELL) _____

HOLD HARMLESS

I understand that injuries are a possibility as a result of participation in this activity. I agree not to hold the TOWN OF LITCHFIELD, the Parks & Recreation Department, its officers, agents and employees and anyone else associated with this program from any loss, costs, expenses, injuries or property damage and liability whatsoever, kind or nature which may arise from my participation or my child's participation in this program. I also understand and agree that my own medical and/or disability insurance will be used in the event of an injury and that if I have no such insurance, that I will be directly responsible for any medical costs whatsoever.

Make checks payable to: Litchfield Parks & Recreation. PO Box 12, Bantam, Ct 06750

SIGNED: _____
(Participant or parent/guardian if child under 18 years of age)

DATE: _____

Method of payment: *Office use only:*
Cash _____ Check # _____