

Registration Form

RETURN WITH PAYMENT TO:
 Concord Parks & Recreation Dept.
 14 Canterbury Rd.
 Concord, NH 03301
 Make Checks Payable to: City of Concord

CONTACT US AT:
 Office: 225-8690
 Fax: 225-8589
 E-mail: recreation@concordnh.gov
 Web: www.concordparksandrec.com

For Office Use Only

Check # _____ CC _____ Cash _____ Schlrsip _____
 Amount: _____ Entered: _____

PARENT/ GUARDIAN CONTACT INFO Please Print	Adult First & Last Name		
	Address		
	City	State	Zip
	Home Phone	Work Phone	Cell Phone
	E-mail	Emergency Contact Name	Phone Number

PLEASE LIST PARTICIPANT INFORMATION AND THEIR COURSE CHOICES

Participant Information		Date of Birth	Sex	Child's Elementary School	Child's Grade (Sept.)	Name of Class / Program	Class Code				Fee
First Name	Last Name										

List any special needs or medical conditions we should know about

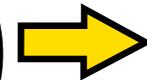
******PLEASE READ AND SIGN THE WAIVER BELOW******

In Consideration for me and/or my child/ward to participate in the sports and other activities of the City of Concord, New Hampshire Park and Recreation Department, we HEREBY WAIVE AND RELEASE the City of Concord, its officers, employees, and agents, individually or in an official capacity for the City (all for purposes herein also referred to as "Releasee") from all liabilities, claims, actions, damages, costs or expenses which we may have against any of the Releasee arising out of or in any way connected to participation in the activity, including, travel to or from the activity, for bodily injury, death or property damage suffered by me/my child/ward before, during, or after said activity. In addition, I give my permission for the child(ren) to be treated by qualified medical personnel in the event that the parent/guardian named below cannot be reached at the phone numbers provided.

I understand and agree that all Parks & Recreation Department classes/events may be photographed. I give permission to Parks and Recreation Department to use participants' photo for display or advertisement by the City of Concord, Parks & Recreation Department.

 **Signature (parent/guardian if participant is under 18 years of age)** _____

_____ **Date**

	Total Fees	
		
	Total Amount	

REFUND PROCEDURE - Refunds are issued only when a class is cancelled by the Parks & Recreation Department or the participant enrolled in the program has a note from a physician's office stating they are not able to participate in the program because of a medical condition. Refunds will not be issued if a class is cancelled due to inclement weather. If you feel your request for a refund was unfairly denied, there is an appeal process. Appeals must be in writing and sent to the Concord Parks & Recreation Department.

REMEMBER THESE 4 EASY WAYS TO REGISTER!

1



Fax

Fax your registration to: (603)225-8589 and contact us at 603-225-8690 with payment information

2



On-Line

www.concordparksandrec.com
 Contact the Parks & Recreation Office for user name & password.

3



Mail-In

Mail completed registration form & payment to:
 Concord Parks & Recreation
 14 Canterbury Rd., Concord,
 NH 03301

4



In-Person/Walk-In

Visit us in at the Parks & Recreation Office at 14 Canterbury Rd.. to fill out your registration in person. Office hours are 8 a.m. - 6:00 p.m.