Chatham Community Center
Telephone 508-945-5175
www.chathamcommunitycenter.com

Floor Hockey

Who: Chatham & Harwich residents and Monomoy Regional School District graduates including Chatham, Harwich & Monomoy.

When: Thursdays 7—8:45 P.M. December 2 - April 28

Location: Community Center Gym

Registration Fee: $20 Please make checks payable to: "Town of Chatham"

Clip here and return X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X X

Floor Hockey

Name: _____ D.O.B._____

Residential Address:_____

Street Address (required) Town (Chatham, North, South, West, Port?)

Home #: _____ Work/Cell #: _____ _____

Email Address: _____

Emergency Contact: _____ Telephone #:_____

Physician: _____ Telephone #:_____

Are there any allergies, medications or health issues that we should know about?

In consideration of your accepting my entry, I, the undersigned adult participant, intending to be legally bound do hereby for myself, my heirs, executors and administrators, waive and release forever any and all rights and claims or damages I may accrue against the Town of Chatham, its contractors, instructors, aides, their successors, representatives and assigns, for any and all injuries suffered as a result of traveling to and from and while participating in the above named program. Further, I give my permission to receive medical treatment in the event of injury while participating in the above named program. In the absence of a signature below, payment of fees and participation in the program shall constitute acceptance of the conditions set forth in the waiver. I agree that pictures taken during program hours may be used for future promotional purposes.

_____ Date: _____

Signature

Registration Form Received By: _____ Date: _____ Paid: _____ Check #: _____