



Town of Marcy | Sign up Form

Program: Workout Wednesdays

Please print:

Date: _____

Participant 1 (Minor) Name: _____

DOB: _____ Age: _____

Participant 2: _____

DOB: _____ Age: _____

Participant 3: _____

DOB: _____ Age: _____

Name of Parent/Legal Guardian

Address: _____

Primary Phone Number: _____ Backup Phone Number _____

Emergency Contact Name and Relationship: _____ / _____

Emergency Contact Phone Number: _____

Circle: Town of Marcy Resident -or- Non-Resident

Date _____

Town Use: Amount Paid _____ Cash Check: _____ Ref# _____ Date: _____

Directors Signature: _____ Date: _____



Town of Marcy | Hold Harmless form

Does hereby covenant and agree to release and hold the Town of Marcy from and against any and all liability, loss, damages, claims, or actions (including costs and attorney fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of participation in any Town of Marcy Park and Recreational Programs, Camps, or Workouts.

I understand participation in this program/event may involve rigorous physical activity and risks of physical injury, and we assume these risks. I hereby give consent for emergency transportation and treatment in the event of illness or injury. I hereby accept responsibility for the payment of any emergency transportation or treatment on behalf of the participant. I further certify the participant is in good physical condition and has no medical physical conditions that would restrict his/her participation in the event/program.

Signature Parent/Legal Guardian

X _____

Date _____

Photo/Video Release (optional)

I understand that by attending any program sponsored by the Town of Marcy I consent to the use of photographs/film/videotapes/electronic representations and or sound recordings made of my minor child or me during that time by the Town of Marcy from any and all liability from such use and publication.

Signature Parent/Legal Guardian

X _____

Date: _____