



Parents Night Out Registration Form



Participants Name _____

SEX (circle one): Male Female

First Name, Middle Name, Last Name

ADDRESS _____ CITY _____ ZIP _____

PHONE _____ BIRTHDATE (MO/DA/YR) _____

AGE as of Sept 1, 2017 _____ GRADE (going into) _____ MEDICAL INFORMATION _____

ALLERGIES _____

Child must be potty trained in order to participate.

Each Night is \$5.00 and goes from 5pm– 9pm

Please check Night(s) participant will be in:

_____ Superhero Night (June 9th)

_____ Fireworks and Fun (June 23rd)

_____ America Night (July 7th)

_____ Christmas in July Night (July 21st)

_____ Mad Scientist Night (August 4th)

_____ Animal Planet Night (August 18th)

_____ NUMBER OF Nights X \$5.00 = _____ Total amount due

Paid by: () Check # _____ () Cash \$ _____ *Make check payable to City of Hardeeville*

Each night included a snack and craft!

Father Information (or legal guardian)

NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE (h) _____ (cell) _____

EMAIL _____

Mother Information

NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE (h) _____ (cell) _____

EMAIL _____

I. In consideration of the 2017 Parents Night Out I, Parent or Guardian, of the above named candidate for a position in above mentioned Summer Camp program, hereby give approval for his or her participation in activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless the local league organization, the organizers, sponsors, supervisors, participants and persons from any claim arising out of an injury to the boy/girl. I also grant permission to managing personnel or other league representatives to authorize medical care from any licensed physician, hospital, or medical clinic should the boy/girl become ill, when neither parent is available to grant authorization for emergency treatment. I agree to return upon request equipment issued to the boy/girl in as good a condition as when received except for normal wear and tear. I will furnish a certified birth certificate of the above named candidate upon request by league officials.

By signing below, I acknowledge that I have read and agree to Items I. above.

X _____

PARENT/GUARDIAN SIGNATURE DATE