



**TOWN OF EASTON PARKS AND RECREATION DEPARTMENT**  
**2022 SUMMER SOCCER CAMP REGISTRATION FORM**

**Participant information:**

Name \_\_\_\_\_

Age \_\_\_\_ M \_\_\_\_ F \_\_\_\_

Weeks/sessions requested:

June 20 – June 23 \_\_\_\_\_ am only (ages 6-8)

June 20 – June 23 \_\_\_\_\_ all day (ages 9-14)

July 24 – July 27 \_\_\_\_\_ am only (ages 6-8)

July 24 – July 27 \_\_\_\_\_ all day (ages 9-14)

Medical Concerns: \_\_\_\_\_

**Parent/Guardian (please print)**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Home phone: \_\_\_\_\_ Cellphone: \_\_\_\_\_

Email \_\_\_\_\_

**Emergency contact information:** (if different from above)

Name (please print) \_\_\_\_\_ Phone \_\_\_\_\_

**Alternate emergency contact:**

Name: \_\_\_\_\_ Phone \_\_\_\_\_

Insurance: Carrier: \_\_\_\_\_ Policy # \_\_\_\_\_

I acknowledge that I have complete understanding of the potential risk associated with this activity, including injury or death, and I voluntarily agree to assume all such risk. I hereby release, discharge, indemnify and agree to hold the Town of Easton, all agencies, its officers, agents and employees, harmless from and against any and all liability, claims actions, suits, damages, losses, or injuries of any kind, nature, or description, including without limitation personal injuries and/or death, medical expenses, and economic damages arising or claimed as a result of an act or omission related to the program(s) offered by any affiliated program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_