

CARIBOU PARKS & RECREATION DEPARTMENT

2018 -2019 Youth Programs Registration Form

Please use this form to help expedite the registration process. Fill out one form per child. Please make checks payable to the Caribou Parks and Recreation Department for all fee base programs.

PLEASE PRINT (please use black or blue ink only)

Child's name _____

Date of Birth _____ Age as of May 1 this year _____

Attending what school this fall _____ Current Grade _____

Mailing Address _____

Actual Street Address _____

Parent's Name _____ **E-Mail** _____

Phone # - Work _____ Home _____ Cell _____

Allergies _____ current medications _____

And/or other medical issues that staff should be aware of: _____

In the event of an emergency contact:

Name _____ Phone # _____

EMERGENCY MEDICAL INFORMATION

Name of Insurer _____ Policy # _____

Policy Holders Name _____

I hereby authorize the CPRD staff to provide emergency treatment of any injury or illness my child may experience including transportation to the closest medical facility.

In the event of a medical emergency where local ambulance transport is required I hereby authorize the Caribou Parks and Recreation Department to transport to:

_____ Cary Medical Center _____ The Aroostook Medical Center _____ other (Please specify)

My son/daughter is participating in the Caribou Parks and Recreation Department's programs which may travel to surrounding communities throughout the year, in which they will be traveling by bus or van. I also give permission for my son/daughter to travel by van or bus to games/events with other communities.

INFORMED CONSENT

This authorization is granted only if reasonable effort has been made to contact a parent or guardian at the telephone numbers provided above. My child and I are aware that participation in all recreation programs is potentially hazardous and may involve the risk of injury. As a parent, guardian and/or participant, I am aware of these hazards and my ability, or my child's ability to participate. I hereby, for myself, my heirs, executors and administrators waive and release all rights and claims against the City of Caribou, Caribou Parks and Recreation Department, it's officers, supervisors, employees, agents and volunteers, from all losses, injury, damages, fees and other expenses arising out of, or in connection with, participation in this activity.

I understand this informed consent clause and agree to its conditions on behalf of my child.

PHOTO/MEDIA RELEASE

I DO ___ DO NOT ___ grant Caribou Parks and Recreation Department, the right to use, reproduce, assign and/or distribute photographs, films, video tapes and sound recordings of my child to use in materials they may create.

Signature of parent or guardian _____ Date _____

T-SHIRT SIZE (For applicable programs only) Please X Size needed Please move on to reverse side.

___YS ___YM ___YL ___AS ___AM ___AL ___AXL

Please review the following program list and check all that applies for this child. Make sure to check sessions where required. **Please Check Programs Desired** ✓ (**R = Resident** **NR = Non-resident**)

R/NR	R/NR
_____ Gr 1 Basketball –\$10/\$25	_____ Spring Training Baseball – Ages 9-12.....\$10/\$25
_____ Gr 2 Basketball -\$10/\$25	_____ Track & Field & T-shirt – Ages 7-15 \$20/\$35
_____ Gr 3-4 Basketball -\$10/\$25	_____ Ski-Daddle – Gr 3-5..... \$10/\$25
_____ Gr 5-6 Boys Basketball\$10/\$25	_____ PreSkiSon – Gr 5-8..... \$20
_____ Gr 4-6 Girls Basketball\$10/\$25	_____ Chimney Pond – Gr 5-10..... N/A
_____ Gr 4-6 Cheerleading.....\$10/\$25	_____ Downhill Skiing Gate Racing– Gr 3-8..... \$20
_____ RSU Early Release #1 – Nov 19\$5	_____ Downhill Skiing Gate Racing (w/season pass). \$5
_____ RSU Early Release #2 - April 26\$5	_____ Ski 4 Life - Gr 4-8 \$80
_____ RSU Early Release #3 - May 17\$5	_____ Ski 4 Life (has pass/skis/no lesson..... \$20
_____ ATV Safety - Ages 10 & over\$5	_____ Hot Shots – Ages 9-18.....N/A
_____ Babysitters Course - Ages 11-15.....\$35	_____ Aquaculture Gr 1-4..... \$10
_____ Pitch, Hit & Run - Ages 7-15.....N/A	

***** **For Staff Use Only** *****

Childs Name _____

RESIDENTS		NON-RESIDENTS	
\$10 per program or \$50 per year	\$	\$25 per program or \$125 per year	\$
\$10 Track & Field T-shirt fee	\$	\$10 Track& Field T-shirt fee	\$
\$80 Ski 4 Life or (\$20)	\$	\$80 Ski 4 Life or (\$20)	\$
\$20 PreSkiSon	\$	\$20 PreSkiSon	\$
\$40 Skiing Gate Racing	\$	\$40 Skiing Gate Racing	\$
\$35 Babysitters Course	\$	\$35 Babysitters Course	\$
\$5 ATV Safety Course	\$	\$5 ATV Safety Course	\$
Early Release Day Trips	\$	Early Release Day Trips	\$
	\$		\$
	\$		\$
	\$		\$
TOTAL AMOUNT DUE	\$	TOTAL AMOUNT DUE	\$

Make Checks payable to: CARIBOU PARKS & RECREATION DEPARTMENT

\$_____ Cash \$_____ Check # _____ _____ Resident _____ Non-Resident _____ Staff Initials