

# Participant Registration Form

Head of Household/Payee \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_, OH Zip Code \_\_\_\_\_

E-mail Address \_\_\_\_\_

Are you employed in the City of Painesville? Y N Company Name \_\_\_\_\_

Activity Name	Participant Name	Birthday	Fee
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TOTAL= \_\_\_\_\_

Card Type: VISA MasterCard Name on Card: \_\_\_\_\_

Credit Card # \_\_\_\_\_ Expiration \_\_\_\_\_

## ***IF A PARTICIPANT IS UNDER 18 PLEASE COMPLETE THE FOLLOWING***

I \_\_\_\_\_, Parent/Guardian of \_\_\_\_\_ have read and signed the above form. I understand that my child will be accompanied by staff/counselors on field trips and during the normal course of the program. In granting permission, I recognize that such activity may be hazardous and that injury or accident may occur as a result of direct or indirect participation. Therefore, I agree to release the City of Painesville and its employees, agents, and volunteer aides from liability as a result of accidents or injuries incurred while participating in the activity/program.

Parent Signature (If participant is under 18) \_\_\_\_\_

Date \_\_\_\_\_

# Ways to Register

- \* Register/pay over the Phone using your credit/debit card (Visa/MasterCard only)
- \* Fax the above form to us at 440-639-4938, please include credit card info.
- \* Mail the above form to us at Painesville Recreation P.O. Box 601 Painesville, OH 44077  
If paying by check, make check payable to "The City of Painesville"
- \* Pay in person with cash/check/credit/debit card at our office at 54 Mentor Ave. Monday-Friday 8am-5pm.
- \* Pay in person after hours using our drop box located to the bottom left of our front door at 54 Mentor Ave.

