



City of Lambertville
18 York Street, Lambertville, NJ 08530
609-397-0110

Summer Recreation Program
Registration Form

Fee: \$60 per week per child/10% Discount for Second Child When Enrolled the same week.

Please check the box above the designated week(s) that your child will attend the summer program.

<input type="checkbox"/> JUNE 19-23	<input type="checkbox"/> JUNE 26 -20	<input type="checkbox"/> JULY 3 – 7	<input type="checkbox"/> JULY 10 -14	<input type="checkbox"/> JULY 17-21	<input type="checkbox"/> JULY 24-28
FEE PAID:			PAY AS YOU GO!		
PAYMENT METHOD:			<i>Sign up at the beginning of the season and pay for attendance at the beginning of each week of camp.</i>		
CHILD'S NAME			AGE		
PARENT/GUARDIAN			HOME PHONE NUMBER		
			CELL PHONE NUMBER		
ADDRESS			CITY/STATE/ZIP CODE		
EMAIL ADDRESS:					
EMERGENCY CONTACT					
EMERGENCY CONTACT PHONE NUMBER					
<i>PLEASE LIST THE NAMES AND PHONE NUMBERS OF THOSE AUTHORIZED TO PICK UP YOUR CHILD</i>					
NAME			PHONE NUMBER		
NAME			PHONE NUMBER		
NAME			PHONE NUMBER		
CHILD'S MEDICAL CONDITIONS OR ALLERGIES					

RELEASE OF LIABILITY:

I, _____, parent/guardian of _____, agree to release, indemnify and hold harmless the City of Lambertville, County of Hunterdon, from and against any loss, damage or liability, including attorney's fees and expenses incurred by the latter entrees and their respective employees, agents, volunteers or other representatives arising out of or in any manner relating to the summer recreation program.

Date _____

Please print your name: _____