

# STAFFORD RECREATION REGISTRATION

Please list all children (**Last name, first name and ages**) that will be attending recreation

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mother's name: \_\_\_\_\_

Father's name: \_\_\_\_\_

Mother's workplace & phone: \_\_\_\_\_

Father's workplace & phone: \_\_\_\_\_

Daycare provider: \_\_\_\_\_

Address & phone: \_\_\_\_\_

Days & times of care: \_\_\_\_\_

In case parent(s) or daycare provider cannot be reached, who should be contacted in the event of an emergency? Name: \_\_\_\_\_

Address & phone: \_\_\_\_\_

List any allergies, medications and other health information staff should know:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have read the **DISCIPLINE AGREEMENT & POLICY**. I understand that while my children are attending the recreation program whether at the park or on field trips, the supervisor & counselors are in charge. Participants are required to follow the rules set forth by the staff. If, however, any difficulties or disagreements arise, I, as parent/guardian will address my grievances to the Stafford Recreation Director or the Recreation Committee.

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Date

Comments: