

## **Recreation Department**

Make Checks Payable to: Town of Little Elm 100 W. Eldorado Parkway Little Elm, Texas 75068

## **Program Registration Form**

		First Name:							
Last Name:									
reet Address:									
City:		State:	State:			Zip:			
Date of Birth:		Age:	Age:		Sex				
				(Circle One):	М	or	F		
Cell Phone:		Work/Home Ph	one:						
mail:									
Emergency Contact Name:		Emergency Cor	Emergency Contact Phone:						
vou are registering	for an Adult Athletic Lea	adue nlease compl	lete the in	formation be	elow.				
If you are registering for an Adult Athletic Leag Team Name:		<u> </u>	Managers Name:						
Program Registration Information (Please Print)		nt):	(Office Use Only)						
Program Code #: Program Name:		lame:	Fee:	Check # Cash	Date		oloyed itials		
						-			
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d/or otherwise provided by the any other type of activity (hereinaft of the received of the read of the read of the read of the registrant during the Action and in consideration of my/our and in consideration of Litt gatees, administrators, executors and all actions, causes of actions, anyway arising out of or connect operty damage, legal fees and/or	RELEASE AND ndividual(s) being registered, agree to fown of Little Elm (the "Town") including registered; agree to rewrite Elm (the "Town") including the individually and collectively referred agent(s) for the registrant, to conset y by such professionals and arising out tivities may be used for any purpose. In participation in the Activities, I hereby the Elm, its Council Members, officers, and assigns, in whole or in part, in book claims, demands, damages, lawsuits, council assigns, in whole or in part, in book claims, demands, damages, lawsuits, council and the costs caused by or related to any neglion of this release and acceptance of the yother defense it may have at law and the releasees.	g, but not limited to, members to as the "Activities") and herebent to medical, emergency, sur t of and/or in conjunction with agents, representatives, employeth their private and public capasts, loss of services, expenses to pation in the Activities, includigent or intentional act of any Resame shall not constitute a war	pate in activities ships, passes, act you authorize the gical and/or dent, directly or incomplete, volunteer actities, (hereina and compensating, but not limeleasee.	dmissions, classes, in the common terms of the	programs, spees, volunteers, examinations ares. I agree picaive any and a birs, instructors erred to as "Rein or unknown, amages, injury as, and its Releases, and its Releases, volunteers, and its Releases, and its Releases, volunteers, injury as, and its Releases, volunteers, injury as, and its Releases, volunteers, volunteers, injury as, and its Releases, volunteers, volunt	cial events program c and/or any tures take  Il claims t , member leasees") fi on accoun (including	s and/or directors y and all n of me hat I/we s, heirs, rom any nt of, or y death), its/their		