



Rumson Recreation Paper Registration Form

This Recreation Registration Form is for payments by check and cash or waivers. Credit card payments accepted on-line only and full registration may be completed on-line. To register on-line or set up a family account, visit **www.rumsonrec.org**.

NOTE: In order to process this registration, you must have an existing on-line Rumson Rec Family Account, with adult and child(ren)'s information completed. Please complete both sides of this form and remit with full payment to Rumson Borough Hall, 80 East River Road. Checks are payable to "Rumson Recreation" with program in memo. Do not mail cash or put cash in drop box. A confirmation will be emailed via the Rumson Rec account when your registration has been processed. For a full description of Rumson Recreation's Registration process and policies, please visit www.rumsonrec.leagueapps.com/leagues.

Please write legibly and complete entire 2 page form. Please complete a separate form for each registration.

Today's Date _____

REGISTERED PARENT/GUARDIAN ("RPG") INFO

RPG Last Name _____ First Name _____

Are you the participant's legal guardian (Y/N): _____

Street Address _____ Town: _____

Home tel (if used): _____ Mobile: _____ (Circle preferred phone)

Email: _____

PARTICIPANT'S INFO

Child's Last Name _____ First Name _____

DOB: _____ Fall Grade: _____ School: _____ Gender (M/F): _____

Medical or other concerns (list "None" if n/a): _____

Emergency Contact Name: _____ Phone: _____

PROGRAM INFO (Please see www.rumsonrec.org for program descriptions and registration policies)

Full Program Name (include age division):

Program Fee: _____

(\$50 Late Fee applicable on all registrations one month after registration opens)

Total Enclosed: _____ Check #: _____ Active Public Safety Volunteer (check here): _____

PUBLIC SAFETY VOLUNTEER (if applicable)

Name of Active Volunteer _____ Company: _____

Please complete both sides of this Registration Form



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MEDICAL RELEASE

I hereby certify that named participant is in good physical health, has had a recent physical and may participate in all program activities. I will not hold the Borough of Rumson or program personnel responsible in the event of an accident or injury resulting from my or my child's participation. If neither parent or guardian is available, I hereby authorize the Borough of Rumson and program personnel to take emergency measures deemed necessary. I give permission for my child to be provided emergency treatment at a local hospital.

Signature

Date

CODE OF CONDUCT

I have read the Code of Conduct available at www.rumsonrec.org and agree to abide by the Code as a Parent, Volunteer, and also to read and explain to my child the Code of Conduct. I understand that any violation of the Code can result ultimately in my suspension or my child's suspension, without refund, from an activity at the sole discretion of the Rumson Recreation Commission. In addition, I affirm that all the information provided on this registration form and my online account is accurate.

Signature

Date

PROGRAM FEES ARE NON-REFUNDABLE AND NON TRANSFERABLE

I have read, understand, and agree to the Registration Policy posted at www.rumsonrec.org, including the fact that program fees are non-refundable and non-transferrable.

Signature

Date

Print Name of Signatory