

For Recreation Use
Payment: _____
Date: _____
Receipt: _____

**Chanute Recreation Commission
General Activity Registration Form**

Parents Name: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Participant(s) Name	Age	Class/Activity	Session	Days	Time	Fee
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Total Amount: _____
Enclosed: _____

Please Make Checks Payable To: **Chanute Recreation Commission**
Return Completed Form To: **Chanute Recreation Commission**
1621 West 14th
Chanute, KS 66720

WAVIER: In consideration of the Chanute Recreation Commission permitting the above listed participants in its program, I hereby agree to assume all of the risks of injury to or death of the participants associated with the program. I agree to release and hold harmless the Recreation Commission, it's employees, agents, representatives, coaches & volunteers from any and all claims that the enrolled or his/her heirs, executors, administrators or assigns may have or claim to have resulting from his/her participation in the program. PHOTO PERMISSION: We the parents or participating individual do hereby grant permission for pictures to be used in publicity or brochures related to Chanute Recreation Commission.

Parent/Guardian Signature _____ Date _____