

TOWN OF MIAMI LAKES COMMUNITY AND LEISURE SERVICES DEPARTMENT

O 6601 Main Street, Miami Lakes, FL 33014

Youth/Adult Activity Registration Form

ADULT ID#_____

1) PARTICIP	ANT'S INFORMATION (Please print or type)			
Full Name _					
	Last	First	Middle	Birthdate	Gender
Address					
	Number & Street		City	State	Zip
Telenhone				Email	
гоюргюно	Home	Work	Cellular		
2) PARTICIP	'ANT'S LEGAL GUARDI	AN INFORMATION			
·uii iname	Last	First	Middle	Birthdate	
elepriorie	Ноте	Work	Beeper	Cellular	Email
-ull Name					
	Last	First	Middle	Birthdate	
Геlephone					
	Home	Work	Beeper	Cellular	Email
AME				RELATIONSHIP	
4) WAIVER	AND CONSENT				
Leisure Service arising from in defend the sai to myself rega negligence of	s a participant, or as the pare ces Department, I hereby wa njuries sustained while particip id Town, its agents, servants a ardless of whether such injur the agents, servants and emp	ive any claim against the pating in or using said faci and employees from any cy to said child or to myselloyees of the Town.	Town of Miami Lakes ar lities to myself or said child elaim, damages on demand elf is caused in whole or i	nd it's agents, servants and d. I do covenant to indemr d hereafter arising out of an n part by the negligence o	d employees here nify, hold harmless ny injury to said chi of said Town or by
location field to	rips via Town van or commerc	ial bus service and walkin	g trips.	on to and nom the camp, p	. og. am . ooaom . o
Miami Lake	image may appear in e es may use my child's is document.				
******	*********			DIAN OF PARTICIPANT S	
Program 1	Name	Date	Received		
Program 1	Dates	Reco	eived From		
Total Fee	<u>, </u>	Tow	n Representative Signature		
Payment	Method	Mia	mi Lakes Resident Y or N		