



# Township of Stone Mills

## Program Registration Form

Please complete and return application with payment in person to the Stone Mills Municipal Office at 4504 County Rd 4, Centreville.

Program: Canoe/Kayak

Participant's Name: \_\_\_\_\_

Birthdate: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Address: \_\_\_\_\_

Parent/Guardian's Name (if applicable): \_\_\_\_\_

Home # \_\_\_\_\_ Work# \_\_\_\_\_ Cell# \_\_\_\_\_

Emergency Contact's Name \_\_\_\_\_ Phone# \_\_\_\_\_

Allergies? Food or Environmental \_\_\_\_\_

Medical Conditions or Medications \_\_\_\_\_

Health Card Number \_\_\_\_\_

Do you wish to Kayak or Canoe? \_\_\_\_\_

If canoeing, do you wish to canoe in the same boat with another specific participant? \_\_\_\_\_

Which Day(s) does the participant wish to attend Program/Event? Please Circle:

Thurs July 11<sup>th</sup>    Thurs July 25<sup>th</sup>    Thurs Aug 8<sup>th</sup>    Thurs Aug 22<sup>nd</sup>

**Bus Drop off and pickup Time and Location:**

Drop off Time: 8:30am - Pickup Time: 4:00pm

4504 County Road 4, Centreville

Fee: \$35.00 Per Day (methods of payment include cash, cheque or debit)

**Parent/Guardian Agreement (for participants under 18 years)**

The above-mentioned participant has my permission to join in the canoe/kayak program indicated above. I will provide his/her transportation to and from the program. I am aware that there are always risks associated with any physical activities. Having knowledge of these risks and being allowed to participate in the program/event, I hereby assume all risk of injury, damage, and liability arising from such activities or use of any equipment and hereby release the Township of Stone Mills and its officials, employees, and agents of any claims, lawsuits, or any personal injury or other consequences occurring to my child as a result of their voluntary participation in the activities being registered for.

**Parent/ Guardian Signature:** \_\_\_\_\_

**Participants Agreement (for adults)**

I am aware that there are always risks associated with any physical activities. Having knowledge of these risks and being allowed to participate in the program/event, I hereby assume all risk of injury, damage, and liability arising from such activities or use of any equipment and hereby release the Township of Stone Mills and its officials, employees, and agents of any claims, lawsuits, or any personal injury or other consequences occurring to me as a result of my voluntary participation in the activities being registered for.

Participants Signature: \_\_\_\_\_

**OFFICE USE ONLY**