

City of Waterbury
Department of Public Works
Bureau of Recreation

Adult Program Registration

For Office Use Only Paid in Full _____ Receipt # _____
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Program Name: Zumba Fitness Program Year: 2008

Name: _____ Birth Date: _____ Age: _____

Address: _____ City: _____ Zip Code: _____

Home #: _____ Cellular #: _____

Medical Information

Any know allergies: _____ if yes, please list _____

Are you taking medications? _____yes _____no


If yes, please list: _____

Emergency Contact

List the names and numbers of two emergency persons we can contact.

1. Name: _____ Telephone #: _____

2. Name: _____ Telephone #: _____

The undersigned hereby gives permission _____ To participate in the  class. The program at Chase Park House
Recreation Center

Or under the sponsorship of the City of Waterbury, Department of Public Works, Bureau of Recreation, and to participate in all activities scheduled in our facility. The undersigned _____ (Recreation Center) in consideration of permission extended to me does hereby and for my heirs, executors, administrators, successors and the assignees release, acquit, and forever discharge the Waterbury Bureau of Recreation and the City of Waterbury, its agents servants, and all other associations from all claim, actions, causes of action, demands, cost, loss of service, expenses and compensation whatsoever, which the undersigned now has or which may hereafter accrue on account of or in anyway growing out of all known, and unknown foreseen, and unforeseen, bodily and personal injuries and property damage and the consequences thereof resulting or to result in accident, casualty, or event which occurs during participation in all field trips and activity/team/program offered at _____

Participant's Signature: _____ Recreation Center
Date: _____ 2008

Media Release

I give permission to be photographed by the newspaper to be used in promoting Bureau of Recreation programs _____Yes _____No

Participant's Signature: _____

Print Participant's Name: _____

Staff Signature _____ Date: _____2008