

TOWN OF WILTON
 PARKS AND RECREATION SUMMER CAMPS
 158 Weld Street Wilton, Me 04294

PROGRAM_____

DATE OF BIRTH___/___/___

NAME_____ AGE_____ GRADE_____

MAILING ADDRESS_____ PHONE_____

I /We the parent/guardian of the named boy/ girl, do hereby give approval to his/ her participation in any and all activities of the Wilton Recreation Department. Program listed above for the current season. I/ We do further release, absolve, indemnify and hold harmless, waiving all claims against the Wilton Parks and Recreation Commission, the Director, the Organizer, and the Supervisors appointed, any and all of them. In case of injury to my son/ daughter, I/ WE hereby waive all claims against the Wilton Parks and Recreation Commission, the Director, the Organizer, and any of the Supervisors appointed, also included is when riding on the bus to or from these activities. The Recreation Department reserves the right to decide player eligibility based on inappropriate behavior.

I/We understand that the Wilton Recreation Department does not carry any accident insurance.

I/We will provide any insurance that we deem necessary for our child.

Parent/Guardian

Please check all that apply:	Grades	Time	Date
\$ 20 ___ Co-Ed Soccer	1-6	6-7:30pm	8/17-8/20
\$ 25 ___ Girls Basketball	3-8	11:30 am-1:30 pm	7/27-7/30
\$ 25 ___ Boys Basketball	3-8	9-11 am	7/27-8/30
\$ 20 ___ Field Hockey	2-4 5-8	5-7pm	7/27-7/30
\$ 20 ___ Arts & Crafts	Ages 5-8 Ages 9-12	10-11am 11:15-12:15	6/29-8/3

For out of town participants please add \$5.00 to the price listed