Jones County Recreation
Registration Form
(Required)
Please Print

Participant Name: _____ _____ _____ _____
Last First MI

Age: _____ Date of Birth_____
Mon. Day Year

Address: _____
Street Address/PO Box City State Zip

Phone #_____-_____-_____ Email Address:_____

Parent/Legal Guardian: _____ Phone#____-_____-_____
(if under 18 yrs) Last First Mi Emergencies

Activity/Sport_____

Today's Date_____
Mon. Day Year

T-Shirt Size _____

Fee Paid at Registration $_____

Physician's Name: _____ Phone: _____

Participants Medical History (allergies, recent or medical conditions,etc)

_____

_____

Risk Acknowledgement and Consent to Participate Statement

We, the undersigned, are the parent's/guardian of the above mentioned participant. We further undersand that it is the parents' responsibility to provide all transportation to and from practice or games. We specifically authorize Jones County Recreation personnel, paid or volunteer, and instructors to summon emergency assistance or take our child to a doctor or the emergency room of the hospital in the event it is deemed necessary. We release Jones County Recreation Department, officers, directors, coaches, managers, volunteers and officials from any liability by reason of any injury that might be sustained by our child. I understand this is a contact sport, and I take full responsibiities for injuries that may occur.

Participant's Parent/Guardian's Signature_____ Date_____
(REQUIRED)

Please make checks payable to **Jones County Recreation.** Mail all fees and registration forms to : **Jones County Finance Office, 418 Hwy 58 N, Unit A, Trenton, NC 28585. Please include the participant's name on the check.**

For more information, please contact Eileen Dove, Recreation Coordinator, at 252-448-1660 or 252-229-8075. Email: edove@jonescountync.gov

Forms are also available online at www.jonescountync.gov