FREEHOLD BOROUGH 2023 SUMMER RECREATION
PROGRAM REGISTRATION FORM
PLEASE PRINT ALL INFORMATION CLEARLY

ALL REGISTRANTS MUST INCLUDE A COPY OF CURRENT PROOF OF RESIDENCY FOR ENROLLMENT TO BE FINALIZED AND ACCEPTED.
This program will be accepting youth entering 3rd– 8th grades September 2023 – Separate Form Required for Each Child.

Child's LAST Name:	**Child's FIRST Name:**
D.O.B. / /	Gender: M / F Age:
Grade as of September 2023:	School:

T-Shirt Size: ***Youth: YS____ YM____ YL____ YXL___ ***Adult: S____ M____ L____ XL____ XXL____

Parent #1: LAST Name: _____FIRST Name: _____

Home/Work Phone Number: _____ Cell Phone number: _____

*****E-Mail Required _____

Parent #2: LAST Name: _____FIRST Name: _____

Home/Work Phone Number: _____ Cell Phone number: _____

*****E-Mail Required _____

Address: _____ Town: _____

Emergency Contact Other than Parent: _____ Phone: _____

Borough Residents: $25 for the first child and $5 extra for each additional child

Non-Borough Residents: $50 for the first child and $5 extra for each additional child

Payment methods: Cash or Checks made payable to: Borough of Freehold

Program Dates: June 26th – July 28th
Program Time: 12:00 PM – 4:00 PM
PROGRAM MAXIMUM IS 100 PARTICIPANTS

Please Check weeks attending:

Attending	Week	Dates
	1	June 26 - 30
	2	July 3 - 7
	3	July 10 - 14
	4	July 17 - 21
	5	July 24 - 28

Freehold Borough Summer Recreation mailing address: 30 Mechanic St, Freehold, NJ 07728 (Attn: Sascha Duckenfield)
Summer Recreation Program Physical address: Park Avenue Complex - 280 Park Ave, Freehold, NJ 07728

NO REGISTRATIONS WILL BE ACCEPTED AFTER MAY 1, 2023

Child's LAST Name:	Child's FIRST Name:

*Allergies or Medical Issues: _____

_____

*Special Needs, Limitations, Restrictions: _____

_____

ACCIDENT INSURANCE: In order to additionally protect participants in our Recreation program, Freehold Borough maintains a "LIMITED FORM OF CONTRACT" accident insurance for youth sponsored programs which is intended to be only supplemental to your own personal health insurance. This coverage has restrictions and limitations and does not include individuals over the age of 18. All participants are encouraged to carry their own personal health insurance to adequately be protected in case of emergency.
PROGRAM ACCIDENT INSURANCE/DISCLOSURE STATEMENT: By submitting this application, I certify that I am the parent/guardian of the individuals listed above and give permission for him/her to participate in the programs selected. This agreement is made upon the condition that I assume all risks and hazards incidental to the individual's participation and do hereby waive, release, absolve, indemnify, and hold harmless the Borough of Freehold Summer Recreation, and its agents and employees for any claim arising out of injury to the individual listed on this form. I confirm that he/she is in good physical condition and does not have medical issues that could be aggravated by his/her participation. We agree to abide by all rules, regulations, and policies set forth by the Borough of Freehold Summer Recreation. In case of a medical emergency, I give permission for treatment by a hospital or physician. I give permission to the Borough of Freehold Summer Recreation staff and agents to transport him/her to recreation events, if necessary. I accept that no refunds will be issued.

Based on enrollment numbers we may offer a 4:00pm – 5:00pm aftercare program for $5 a day or $25 a week?

Would you be interested? Yes or No

Please check if your child(ren) will be attending any of the following:

____ ***21st Century***

____ ***Credit Recovery***

____ ***Other morning program(s) — Please list: _____***

* ALL FEES ARE NON-REFUNDABLE: NO SWITCHES, NO CREDITS, NO EXCHANGES, NO TRANSFERS

Please Initial:

_____ **I hereby consent to allow my child to participate in Freehold Borough Recreation sponsored activities.**

_____ **I will attend a mandatory orientation to complete the enrollment process.**

Signature Parent/Guardian _____ Date: _____

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