Highland Parks & Recreation Playground Registration



If your name is in our database due to a previous registration, only complete the name line immediately below and proceed to the center of the page.

Head of Household Information:				For office	For office use only:		
Name	Email			Staff Ini	tials A	Amount paid	
Address	City	_ City Zip				Non-resident	
Home phone	Work phone	Work phone			Cash Check #		
Cell phone					* Checks payable to City of Highland		
Emergency contact	Phone	Phone Relationship					
We invite people of all abilities to par	rticipate in our programs. If your chil	ld needs assistar	nce to parti	icipate, pleas	e check this l	oox. L	
Program Participant First Name	Program Participant Last Name	Date of birth	Grade	Male (M) Female (F)	Shirt Size:	Youth (6/8, 10/12, 14/16) Adult (S, M, L, XL)	
	Waiver and R	Release of Liabi	lity				
, , , ,	e and discharge from and waive any a servants, and employees, which migh	•	-				
I understand that activities may be strenuc	ous to my health and that I should consult	a physician prior t	to engaging	in any strenuo	us activities.		
Signature		Date					