



PUTNAM VALLEY PARKS & RECREATION

SELF DEFENSE REGISTRATION FORM

WHEN: Thursday, June 2, 2022 – 6:00PM – 9:00PM

WHERE: Putnam Valley Park Day Camp Facility

COST: \$30.00 Per Person

NAME OF PARTICIPANT: _____

EMAIL: _____

PHONE #: _____

Liability Emergency Medical Release

I hereby give my permission to participate in the town sponsored Putnam Valley Parks & Recreation program. I certify that I am physically fit and that I will not hold PVPR or its agencies and/or representatives liable for any accidents and/or injuries incurred during the course of the program. I give my personal consent to be transported to any emergency facility if injury is sustained. I also consent to any treatment, surgery, diagnostic procedure or the administration of anesthesia that may be deemed necessary based on the medical judgment of the attending physician. PVPR will not tolerate abusive language or any type of misconduct at any of its functions.

SIGNATURE: _____

DATE: _____

(If Participant is under age of 18 – Parent/Guardian must sign below)

SIGNATURE: _____

DATE: _____

Parks & Recreation Office Only:

Date Paid: _____

Amount: _____

Payment Type: _____

Receipt #: _____

