

# PELHAM PARKS AND RECREATION

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## Tap Dancing Lessons (8) Wednesdays May 1-June 19th 6pm-7pm Open to adults 18+

### Participant Release Form

Participant Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Circle: M / F

Address: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email (optional): \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell or Work Telephone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Cell or Work Telephone: \_\_\_\_\_

This is a recreation level beginner Tap dance lesson program. The program will take place (8) Wednesdays beginning May 1, from 6pm-7pm in Sherburne Hall in the Pelham Town Hall.

Tap Dance Lessons may pose risks to all participating because of the level of activity involved. We advise that all adults participating be in good physical condition. Any limitations regarding their physical capabilities should be made known to the Parks and Recreation Department.

Participants should wear comfortable clothing. Some prior knowledge or skill is recommended but not required to take part in this program. Please list any physical or other condition, medications the participant is taking, dietary restrictions, allergies, or other information which may be necessary and helpful to insure participants' health and safety:

I have read and understand the information provided above. I have noted any physical or medical conditions the participant has which might affect his/her participation. He/she meets the standards required for participation and will have the necessary equipment, which will be in good working condition. Net vests are provided for team identification where needed. I assume all the risks normally incidental to the nature of this activity, including risks which are not specifically foreseeable. I will follow the rules and regulations provided by the activity leaders.

I, the undersigned, hereby agree to release, indemnify save and hold harmless the Town of Pelham, the Parks and Recreation Dept., its employees, agents, representatives, coaches, and volunteers, from any and all liability, actions, causes of actions, debts, claims or demands of any kind for property damage or personal injury resulting from failure to obey safety regulations and directions of the activity leader or resulting from the exercise of judgment by the leader in good faith response to emergencies and exigencies which occur during the activity; provided, however, that nothing contained herein shall excuse any of the leaders to act with reasonable care for the safety of the participant during the course of the activity appropriate to the circumstance.

You have my permission to have a physician attend to my son/daughter, if it is deemed necessary, during his/her participation in the above activity. I give my permission for any videotaping or other photographs taken in which my child/ren may appear and understand that Pelham Parks and Recreation may remove any child from the program as it deems necessary concerning the zero-tolerance policy of inappropriate behavior.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Parent/guardian signature

Cost: \$100.00 per participant / Checks payable to Town of Pelham