

PELHAM PARKS AND RECREATION

6 Village Green, Pelham, NH 03076 Phone: 635-2721 Fax: 508-3094 Email: Recreation@pelhamweb.com

Learn a new craft or extend what you know!

NEW ADULT CROCHET LESSONS

Beginning February 11, 2015 for six Wednesday evenings

Participant Release Form

Participant Name _____ (Required) DOB: _____

Address _____ Town _____ State _____

Zipcode _____ Cellphone: _____ *Space is limited!

Email address : _____ Home phone: _____

This is a recreation level learn basics and/or advanced skills of crochet classes. **Space is limited; first come/first served.** This is a 6-week program on Wednesdays starting February 11, 2015 and ending March 25 (skip 2/25) at 16 Pulpit Rock Rd., Suite 2 in Pelham from 6:30-7:30 pm. Program open to age 16 through adults. Supplies are all included. Instructor Andrea Dube.

This program poses limited risks to the participants. These risks may or may not include but are not limited to bumps, bruises, cuts, abrasions, broken bones, concussions, heart attacks and even death. We advise that all those participating should be in good physical condition. Any limitations regarding physical capabilities should be made known to the Pelham Parks and Recreation Department. No prior knowledge or skills are required in order to take part in this program or learn new skills and improve on those you know. A crochet project will be the end result of the classes.

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, if needed, which will be in good working condition. I assume all of 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/coaches/supervisors.

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, 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 me, if it is deemed necessary, during my participation in the above activity. Participation may be videotaped or photographed for the website.

Executed this _____ day of _____, 20____.

Participant Signature (parent if under 18)

In case of emergency and the parents/guardians cannot be reached, please contact:

Name: _____ Relation _____

Town/City/State _____ Telephone _____

For Office Use:

Payment received: _____

Check No. _____

Payable to Town of Pelham: \$60.00

Circle one: MC VISA