

# Town of Pittsfield Recreation Department

## Basketball Camp 2020

\*BRING completed form and payment (cash or check) to the Pittsfield Town Office  
Monday -Friday 8:00a.m.- 5:00p.m. (excluding Wednesdays and Holidays)

\*MAIL forms to Pittsfield Town Office, 112 Somerset Avenue, Pittsfield, ME 04967

Fees Per Child: \$20.00 Pittsfield Resident and \$25.00 Non-Resident

*Checks payable to Town of Pittsfield. Please note the Town does not provide refunds.*

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### Basketball Camp Details:

- August 24<sup>th</sup>-28<sup>th</sup>
- Manson Park Courts 4:30pm-6:00pm
- MSAD #53 Students ONLY (boys and girls), ages 6-12
- Registration Deadline August 24th

#### COMPLETE THE FOLLOWING INFORMATION:

CHILD'S NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_ DOB \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME/CELL PHONE: \_\_\_\_\_ EMERGENCY TELEPHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

IN CASE OF EMERGENCY CONTACT: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

#### Participant Insurance Information:

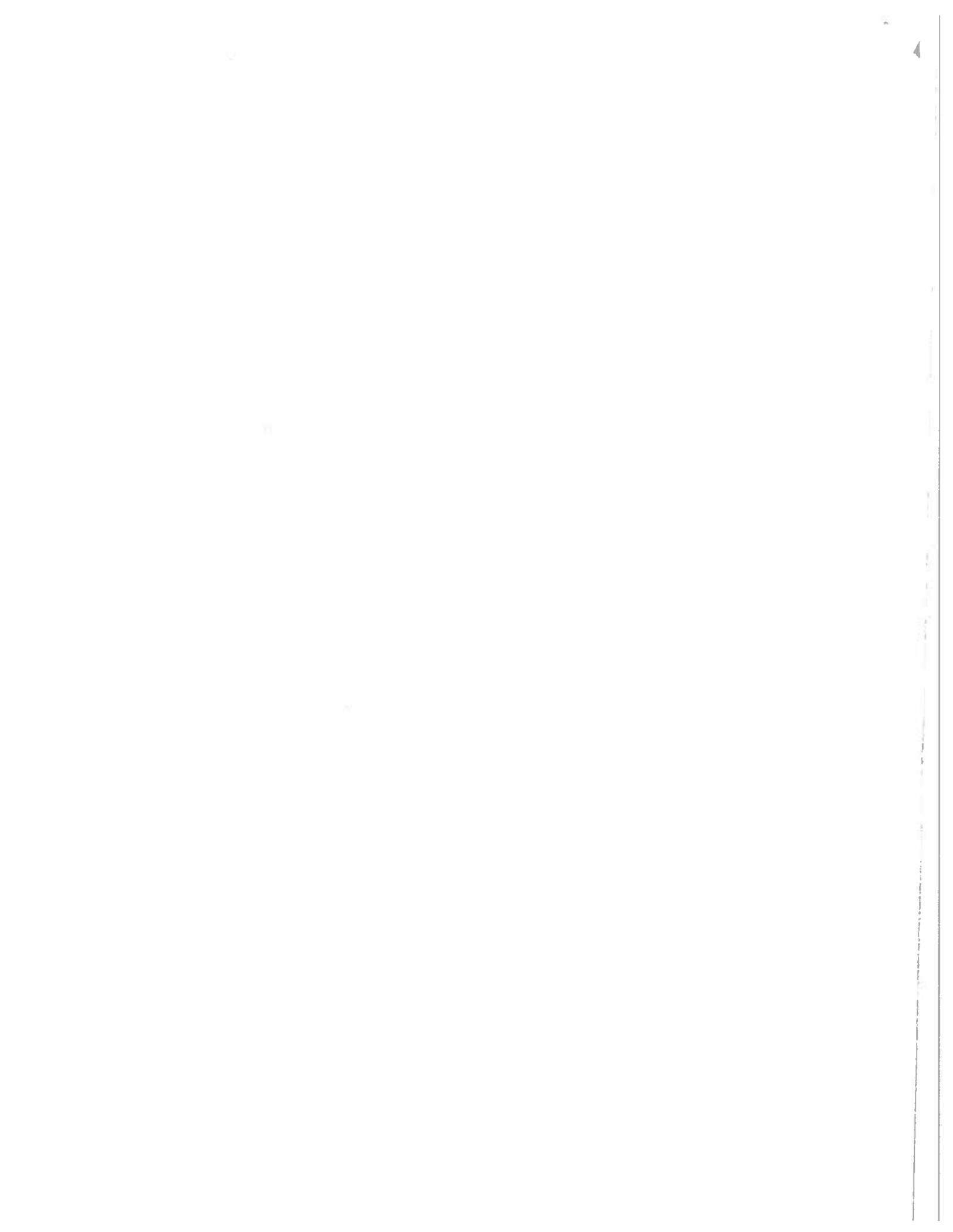
(Insurance information is required for participation in our programs)

Child's Name: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Parent Signature: \_\_\_\_\_



**Pittsfield Recreation Program  
(for Pittsfield, Burnham & Detroit)  
Summer 2020  
Parental Release Form**

**Child's Name** \_\_\_\_\_  
Last First Middle

**Birth Date** \_\_\_\_\_

**Parent Name  
Or  
Guardian** \_\_\_\_\_  
Last First Middle

**Address:** \_\_\_\_\_  
Town State Zip Code Email

**Emergency Contact:** \_\_\_\_\_  
Name Relationship Phone Number

I, the parent or legal guardian of the above-named child, in consideration of that child being allowed to participate in recreational programming, do hereby acknowledge, declare and agree as follows:

1. That I have voluntarily agreed to allow my minor child to engage in all summer recreation activities which he/she has signed up for at the Pittsfield Recreation Department.
2. That I have been fully informed that some recreational activities may be dangerous to my minor child and other participants and which could cause property damage, bodily injury or death. Such dangers, hazards, and risks may include: Abrasions, strains, sprains, muscle aches, dislocation, or fractures. I agree to report all injuries to the Town of Pittsfield within 24 hours of their occurrence.
3. I accept and assume all responsibility and all risk for all harm and injury of every nature, including death, and including exposure to the COVID-19 virus, which may occur to my minor child or which he/she may suffer or cause to others, and for all bodily injuries, damages or loss to any personal property suffered by him/her, or damaged or caused by him/her, while participating in any program or event of the Pittsfield Recreation Department.

4. I understand and accept that failure to comply with the Pittsfield Recreation Department's safety policies and procedures may result in suspension and/or termination of my minor child's access privileges.
5. I hereby approve of the unremunerated use of any photos or the likeness of the applicant/child for the Pittsfield Recreation Department's advertising and promotional use.
6. I understand that I and my child must comply with any applicable orders, guidelines, directives, or policies and limitations related to the COVID-19 virus, including but not limited to any such orders, guidelines, directives, or policies and limitations restricting my access to any programs, venues, and events which are implemented and published by the Pittsfield Recreation Department. Please be advised that there will be a requirement for temperatures to be taken for all children participating in the Pittsfield Recreation programming. Currently and until further notice, all spectators of sports games or events must comply with all applicable orders, guidelines, guidances, directives, or policies and limitations related to the COVID-19 virus.
7. I, on behalf of myself and the above-named child, and on behalf of my heirs, assigns, executors and personal representatives, **HEREBY RELEASE AND HOLD HARMLESS**, the Town of Pittsfield and its officers, officials, agents, and/or employees, with respect to any and all injury, illness, disability, death, or loss or damage to person or property, whether arising from the negligence of the Town of Pittsfield or otherwise, to the fullest extent permitted by law. I further agree to **INDEMNIFY AND HOLD HARMLESS** the Town from any and all causes of action, claims, demands, losses, or costs of any nature whatsoever, arising out of my child's participation in Pittsfield Recreation programming. I further certify that I have read this parental release form, that I fully understand its terms, that I understand that I have given up substantial rights by signing it, and that I sign freely and voluntarily without any inducement.

Parent or Legal Guardian's Signature \_\_\_\_\_

Date: \_\_\_\_\_