

# REGISTRATION FORM



**Town of Huntsville**  
**Program Registration Form**  
 Centennial Centre – 20 Park Drive, Huntsville, Ontario

## Family Information

Last name of Adult	First Name of Adult	
Address		
Town	Postal Code	
Home phone	Cell Phone	Work Phone
E-mail Address		

## Participant Information (can be used for more than one family member)

Participant Name (If different from above )	Date of Birth D/M/Y Or Adult	Program	Level If applies	Day & Time	Medical Condition	Fee	G S T	Non Resident fee <b>10%</b>
<b>Total Fee</b>								

### Office use only

<b>Entered in Class</b> _____
<b>Method of Payment</b>
Cash( ) Interac( ) Cheque ( ) Visa ( ) Mastercard ( )
VISA _____
Mastercard _____
Expiry Date _____
Amount Charged _____
Cardholder Name _____

**Registrations are only accepted during administration hours.**

**Liability Statement** In consideration of the acceptance of my application and the permission to participate in a program sponsored by the department of Leisure Services, Town of Huntsville, I hereby waive and forever discharge the Corporation of the Town of Huntsville, its employees, agents, officers and elected officials from all claims, damages, costs and expenses in respect to injury or damage to my person or property, however caused, which may result during my participation in the program. The Town of Huntsville reserves the right to use photographs of recreation programs for promotional purposes.

**Refund Policy** Requests for refunds will not be accepted after the first day of lessons. We regret that participants receive no refunds if the cancellation affects the minimum class numbers . Request must be submitted in writing and an administration fee of \$10.00 will be deducted. Any Missed classes cannot be made up at another class at another time .

We reserve the right to cancel, combine or change the times of classes.

Please make a photocopy if you require a copy for your records, or pick up a 2 part registration form from the Centennial Centre.

**Signature:** \_\_\_\_\_