

ACTIVITY/POOL REGISTRATION

Return to: 1 Town Hall Plaza, Valhalla, New York 10595 | 742-2310
COMPUTER REGISTRATION - PLEASE PRINT CLEARLY

Make Checks Payable To: Town of Mount Pleasant

ADULT NAME	LAST:	FIRST:	RECEIPT#:
ADDRESS	E-MAIL:		
PHONE #S:	CITY:	STATE:	ZIP:
	HOME: ()	WORK: ()	EMERGENCY: ()
		SCHOOL DISTRICT:	CELL PHONE: ()

ACTIVITY NUMBER	SESSION LETTER 1 ST CHOICE	SESSION LETTER 2 ND CHOICE	SESSION LETTER 3 RD CHOICE	PARTICIPANT'S NAME		GRADE	AGE	SEX	D.O.B.	ACTIVITY NAME	FEE
				LAST	FIRST						
12345	A	B		Doe	John	1	6	M	00/00/00	Sample	\$00.00

The undersigned hereby releases the Town of Mt. Pleasant, its Town Board, employees and volunteers of any liability whatsoever in connection with any loss of personal items, damage and/or injuries that the above named person(s) may sustain as a result of his/her participation in the above named programs(s). I further state the above information is accurate and realize that any false information will result in cancellation of program participation or pool membership with no refunds.

Signature _____ Date _____ CASH _____ CHECK # _____ INITIALS _____