

# NORTHAMPTON PARKS & RECREATION DEPARTMENT - REGISTRATION FORM

DO NOT USE this form Youth & Adult Sports, or Birthday Party registrations: Download those packets at [www.northamptonma.gov/recreation](http://www.northamptonma.gov/recreation)

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**PLEASE PRINT LEGIBLY**

New to Northampton Parks & Recreation

I have updated my Information

Adult 1/ Primary Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Primary Phone: \_\_\_\_\_ Second Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Second Adult/Guardian Name: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Second Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Emergency Contact Other Than Parent**

Name \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_

**Photo Release:** May Northampton Parks & Recreation Department use photos of you or your family members for brochure, website, promotional use?  
 Yes  No

**PARTICIPANT'S FULL NAME:** \_\_\_\_\_ Male  Female

Grade in Fall 2020 \_\_\_\_\_

Date of Birth \_\_\_\_\_ School \_\_\_\_\_

Program Name	Session	Day(s)	Level	Start Date	Basic Fee	Non-Res Fee	Total Fee
					\$	\$	\$
					\$	\$	\$

**TOTAL FEE FOR PARTICIPANT** \$

**PARTICIPANT'S FULL NAME:** \_\_\_\_\_ Male  Female

Grade in Fall 2020 \_\_\_\_\_

Date of Birth \_\_\_\_\_ School \_\_\_\_\_

Program Name	Session	Day(s)	Level	Start Date	Basic Fee	Non-Res Fee	Total Fee
					\$	\$	\$
					\$	\$	\$

**TOTAL FEE FOR PARTICIPANT** \$

**PASS PURCHASE**

Pass	Pass Type	Pass Length	Fee	
Aquatic Center	Res: Adult Family Senior Youth Non-Res: Adult Family Senior Youth	6 Month 12 Month	\$	<b>TOTAL AMOUNT DUE</b> <span style="border: 1px solid black; padding: 2px 10px;">\$</span>

Pass Holder's Name(s)	DOB	Pass Issued	Special Considerations/Comments (Use back if necessary)
_____	Male/Female _____	_____	_____
_____	Male/Female _____	_____	_____
_____	Male/Female _____	_____	_____
_____	Male/Female _____	_____	_____
_____	Male/Female _____	_____	_____

Charge my VISA \_\_\_ Master Card \_\_\_ Discover \_\_\_ Card # \_\_\_\_\_ Expiration \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

Office Use Only: Amt Rec'd \$ _____	Cash _____	Check # _____	Credit _____	Date _____	RT Date _____	Staff _____
Amt Rec'd \$ _____	Cash _____	Check # _____	Credit _____	Date _____	RT Date _____	Staff _____