



City of Milford, Connecticut

-Founded 1639-

70 West River Street - Milford, CT 06460-3317

Tel 203-783-3280 Fax 203-783-3284

www.ci.milford.ct.us

Recreation
Department

Margaret Egan Center Programs – Registration Forms

Child's Name

DOB

Activities

Child's Name

DOB

Activities

Child's Name

DOB

Activities

Parent's Name

Day Phone

Cell Phone

Night Phone

Address

Email Address

Emergency Contact

Day Phone

Cell Phone

Night Phone

Important information for instructor (allergies / medications / special concerns, anything the instructor should know about the child)

HOLD HARMLESS AGREEMENT

By my signature, I do hereby assume all risks of personal injury involved in this activity. Acting for my child/children, I hereby release the City of Milford, the Recreation Department, and its agents of liability and suits at law or in equity resulting from this activity. I also acknowledge that there are no refunds after the 2nd class.

Signature of Parent / Guardian

Date