

TOWNSHIP OF OCEAN RECREATION CRAFTY KATIE ADULT WORKSHOP REGISTRATION FORM

Participant's Name	Mailing Address	City		Zip
Home Phone	Cell Phone	Email		
Participant Information – one per person				
Fee is \$25 per workshop Cash or Check only Make checks payable to O.T. Recreation				
Adult Workshop Date		Workshop Name		Fee
			Total Fees	\$

Mail Registration and payment to
 Township of Ocean c/o Recreation 50 Railroad Ave., Waretown, NJ 08758

In consideration of the acceptance of my application for entry into the above event, I hereby waive, release, and discharge any and all claims for damages for death, personal injury, and/or property which I may have, or which hereafter accrue to me, against the entity ad result of my participation in the event. This release is intended to discharge the entity, its agents and employees, and any other involvement municipalities or public entities from and against any liability may arise out of negligence or carelessness on the part of persons or entities mentioned above. I further understand that accidents and injuries can arise out of the event; knowing the risks, nevertheless, I hereby agree to assume those risks and release and to hold harmless all of the persons or entities mentioned above who (through negligence or carelessness) might otherwise be liable to me (or my heirs or assigns) for damages. It is further understood and agreed that this waiver, release, and assumption of risk is to be binding on my heirs and assigns.

_____ Date _____
 Signature of Participant/ Parent/ Legal Guardian