

Readington Recreation Adult Activities Registration Form

Readington Twp. Recreation
509 Route 523
Whitehouse Station, NJ 08889
908-534-9752

Official Use Only	
Check # _____	Cash _____
Registration Fee _____	Date _____

Aerobics _____
Yoga _____
Indoor Soccer _____
Men's Basketball _____
Men's Softball _____

Last Name _____	First Name _____
Address _____	Zip Code _____
Work Phone # _____	
Cell # _____	Home Phone # _____
Emergency Contact _____	Phone# _____
E-Mail _____	
Please Print Clearly	

Known Allergies, Medical Problems or Prohibitions _____

Readington Sports Philosophy and Priorities

The mission of the Readington Adult Sports Program is to provide an opportunity for everyone in our community to participate in a fun and supportive environment. Principles of fair play and good sportsmanship are expected.

The Priorities of our Program

- :
1. Safety
 2. Fun
 3. Comradery

Approval and Emergency Medical Release

* I, the undersigned, agree to participate in this activity and hereby waive, release and agree to hold harmless Readington Township, the Recreation Committee, and all volunteers and persons involved in the program from any claim arising from injury by participation in this activity*

I understand that in the event it is determined by a Certified EMT Volunteer, Police Officer, Physician or Surgeon that I am in need of emergency medical or surgical treatment, then I give my consent to such treatment.
Every effort will be made to call your emergency contact letting them know of your situation.

SIGNED _____ DATE _____

WEB PAGE – READINGTONTWP.ORG RECREATION E-MAIL: REC@READINGTONTWP-NJ.ORG