

Philipstown **Recreation** Department
2013 ADULT PROGRAM REGISTRATION

Please print clearly

First Name _____ Last Name _____

Address _____

Phone (H) _____ (W) _____ Emergency _____

Allergies / Comments _____

Email Address _____

PROGRAMS/SUGGESTIONS YOU ARE REGISTERING FOR:

- | | |
|----------|-----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |
| 7. _____ | 8. _____ |
| 9. _____ | 10. _____ |

_____ The Philipstown Recreation Department reserves the right to photograph, video or record any Recreation Program and use for future promotions. Please check this box if you do not want your picture to be used.

Make checks payable to: Philipstown Recreation Department, PO Box 155, Cold Spring, New York, 10516

All outstanding bills must be paid before participating in new programs. Please call the Recreation Department if you wish to set up a payment plan; inquiries are confidential.

Refunds/Credits: Refunds will be issued to all registrants in case of program cancellation by the Recreation Department. Refunds, at registrants request, may be made up to one week prior to start of a program. Participants may be offered a pro-rated credit towards future recreation fees if a documented problem prevents completion of a program. **There is a 15% administrative fee for all refunds and withdrawals issued less than one week prior to the start of the program. Once the program has begun, there are no refunds except for documented medical reasons. If you do not show for a program and do not have a documented medical reason, you will be responsible for the entire cost.**

The Town's insurance plan is excess to all other valid and collectible individual or group accident and/or health insurance in force at the time of an accident, i.e.; you must submit all bills to your insurance first, and then the Town policy will pick-up the un-paid balance, up to the limits of the policy less deductible.

(Signature) (Print Name) Date