

Hampton County Recreation Department

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Adult – Program Registration & Release Form

Name: \_\_\_\_\_

Program: \_\_\_\_\_

Gender: Male Female Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Please circle one

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

I, \_\_\_\_\_ request registration the above mentioned Program/ Event at the

(Participant)

Hampton County Recreation Dept.

I, \_\_\_\_\_ do take full knowledge and risk of injury to participate in the above

(Participant)

mentioned program. Also, at the participants sole risk and on his/her own behalf and on the behalf of his/hers heirs, executors, and assigns hereby release, discharge, and agree to hold harmless the Hampton County Recreation Dept., its instructors, staff and all parties involved.

I, \_\_\_\_\_ give the Hampton County Rec. Dept. Permission to take and release

(Participant)

pictures for use on the Official Hampton County Website and/ or any other media used for advertising for Hampton County Rec. Dept.

Signature of Participant

Date

Email Address

How Did you hear about us???

Radio

Newspaper

Word of mouth

Flyer

Website

Facebook

Another Student/ Parent

Other: (please specify) \_\_\_\_\_

\_\_\_\_\_