



TOWN OF MUKWONAGO PARKS & RECREATION DEPARTMENT REGISTRATION FORM

Please return to:
Town of Mukwonago Parks & Recreation Department
W320 S8315 Beulah Road
Mukwonago, WI 53149
--- NO FAXED REGISTRATIONS ---
--- CREDIT CARD PAYMENTS ONLINE ONLY ---

Receipt will be sent
ONLY if you provide
a self addressed
stamped envelope

PLEASE USE ONLY BLACK OR BLUE INK

Last Name _____

Mother's Name & Cell Phone # _____

Address _____

Father's Name & Cell Phone # _____

City, State, Zip _____

Mom Work Phone # _____ / Dad Work Phone # _____

Home Phone _____

Emergency Contact Name & Phone # _____

Email Address _____

Allergies/Special Needs _____

Check One: Resident (pays taxes to "TOWN") OR Non Resident Check if interested: Willing to Coach

OPTIONS for Youth Sport Shirt Sizes are as Follows: YOUTH SIZE = YM (10-12), YL (14-16), ADULT SIZE = AS AM AL AXL

Activity #	Activity Name	Participant Name	Sex	↑Shirt↑ Size (see above)	Grade (youth only)	School Attending	Date of Birth (youth only)	FEE
Checks payable to: Town of Mukwonago							Late Fee (\$12.00) per participant	
TOTAL							\$	

FRIEND REQUEST

ONLY ONE FRIEND NAME request per participant. Friends **MUST** request Each other and registration **MUST** be received together **PRIOR** to the Registration deadline to be considered. See Registration Information page.

Friends Name is: (only one) _____
(multiple name requests will not be reviewed)

PAYMENT MUST BE INCLUDED

LATE FEES

Registrations received after 3:30pm on the deadline date are considered late. A non-refundable late fee of \$12 per participant, per activity will be assessed. Please make sure to add this to your registration fee. The Parks & Recreation Director will determine acceptance of the late registration.

I am aware of and understand that there may be potential risks inherent with participation in any recreation activity, and that the Town of Mukwonago and the Town of Mukwonago Parks & Recreation Department are not liable for any injury that may occur. The Town of Mukwonago and the Town of Mukwonago Parks & Recreation Department do not provide accident insurance and cannot assume responsibility for injury to any participants in its recreation programs. I give my permission to the Town of Mukwonago Parks & Recreation Department to take action (call emergency vehicles, transport to doctor/hospital) for myself or my child if immediate medical attention is required due to accident or illness while under his/her/their supervision.

SIGNATURE: Adult Participant OR Parent/Guardian Signature (if participant under 18 years of age): _____

Date: _____

OFFICE USE ONLY

Date Received _____ Check # _____ Cash _____ Online GovPay _____
Mail Drop-off Drop-box Emailed Online GovPay
Rec'd w/friend registration Receipt Mailed Given Initials _____