



Brandon Township Parks & Recreation Adult Program Registration Form

395 Mill Street, P.O. Box 929, Ortonville, MI 48462
Phone (248)627-4640 www.brandontownship.us
Online registration now available!

For Office Use Only Updated 2/9/2021

Ck. # _____ Amt.\$ _____

Date _____ Initials _____

Please X box in front of appropriate program(s):

Non-residents add \$10 per program registration

<input type="checkbox"/>	Basketball
<input type="checkbox"/>	Volleyball
<input type="checkbox"/>	Other/New Program

Add \$10 late fee if registering after registration deadline has passed

Participant Name _____ Date of birth _____

Circle Gender: MALE FEMALE Medical Conditions: _____

Address _____ City _____ State _____ Zip _____

Cell phone: _____ Alternate phone: _____

Township: BRANDON GROVELAND OTHER Email Address _____

Publication Permission: I grant permission for Brandon Township Parks & Recreation to publish my name and/or photo in the local newspaper, cable TV, internet, and any future publications for Brandon Township Parks & Recreation.

YES _____ NO _____

Waiver: I agree that neither Brandon Township, Brandon Township Parks & Recreation nor employees/volunteers associated therewith may be held liable for injuries or losses sustained by the participant/participant's family pertaining to involvement with any program for which the participant is registered. My signature waives the right to seek damages for any such injury or loss and indicates agreement with Brandon Township Parks & Recreation's refund policy parameters.

Refunds: Registration fees become nonrefundable after the registration deadline. If requested in advance of the program registration deadline, refunds are processed in the amount of the paid registration fee less a \$15 administrative fee. Refunds are NOT issued for absenteeism or for dates cancelled due to weather, field conditions, facility availability, or participant scheduling conflicts. Prorated injury refunds are calculated based upon the date the recreation office receives direct notification of the injury by the injured adult participant, and are not based upon the injury date. Refund checks are made payable to the signer of the registration form and mailed to the participant address as listed on the registration form. Checks are mailed within two weeks of refund approval. Registration fees for programs cancelled due to low registration numbers are always refunded in full.

Signature _____ Date _____

Please let us know if you would like to assist with the program.