

***The City of Frederick Parks & Recreation Department***  
***PROGRAM REGISTRATION FORM***

Class Participant  
 Name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Gender: M / F

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Phone (H) \_\_\_\_\_ (Cell) \_\_\_\_\_

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

<b>Program/Class Name</b>	<b>Date &amp; Time</b>	<b>Fee</b>

**Total Amount \$** \_\_\_\_\_

Place in Drop Box or mail completed form and check/credit card information to:  
 City Parks and Rec, 121 North Bentz Street, Frederick, MD, 21701, c/o Class Registration *(checks made payable to "City of Frederick")*

Credit Card Information:

Card Holder Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Visa  Master Card Account Number: \_\_\_\_\_ 3 Digit V code: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

**Authorization for use of Photographic likeness: I agree to allow the City of Frederick Recreation Department to take and utilize photos, slides and video images of the above registered individual(s) for the purpose of promotion and publicizing of the Department's programs. IF I prefer to not allow the above registered individual(s) to be photographed, I will call the Recreation Department at 301-600-1492 to inform them of this request.**

\_\_\_\_\_  
 (Parent / Guardian's signature if participant is under 18 years of age)

\_\_\_\_\_  
 Date