



- Lower Windsor Township
- East Prospect Borough
- Yorkana Borough
- Hellam Township
- Hellam Borough
- Wrightsville Borough
- Other

## Program Registration Form

Participant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Legal Guardian (if participant under 18): \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

T-Shirt Size (if applicable): \_\_\_\_\_ Birth Date/Age (youth and children): \_\_\_\_\_

Participant's Name	Program	Fee
		<b>Total:</b>

### Pay By Check

Make Checks Payable to: EYARC

Check # \_\_\_\_\_

### Pay By Credit Card

Visa

MasterCard

Discover

CCV #: \_\_\_\_\_

Account Number: \_\_\_\_\_ Exp Date: \_\_\_\_ / \_\_\_\_

Mail to: EYARC, PO Box 313, East Prospect, PA 17317

E-mail to: [eyarc@comcast.net](mailto:eyarc@comcast.net)

Call: 717-246-8155

Signature (participant or legal guardian if under 18)

Date

Waiver of Liability: I, the above-named participant for participation in the above named activity, freely and willfully, without coercion or pressure of any kind, waive any claim for bodily injury or property damage against the Eastern York Area Recreation Commission, the Eastern York Area Recreation Commission Board, Lower Windsor Township, East Prospect Borough, and Yorkana Borough, the respective supervisors, employees and volunteers during the participant's association with this activity. In addition, I give permission for the above named participant to be photographed during the above named activity for promotional purposes.