# Parks and Recreation Registration Form

**Purpose:** This form is used to register participants for local government-sponsored recreational programs, classes, or events. Please complete all applicable fields to ensure proper enrollment and communication regarding the selected activity.

## Participant Information

**Full Name:** {fullName}

**Date of Birth:** {dateOfBirth}

**Age:** {age}

**Address:** {address}

**Phone Number:** {phoneNumber}

**Email:** {email}

## Emergency Contact

**Emergency Contact Name:** {emergencyContactName}

**Relationship:** {emergencyContactRelationship}

**Phone Number:** {emergencyContactPhone}

## Program Details

**Selected Program:** {programName}

**Location:** {location}

**Start Date:** {startDate}

**End Date:** {endDate}

**Preferred Session Time:** {sessionTime}

## Medical Information

**Allergies or Medical Conditions:** {medicalConditions}

{#hasInsurance}

**Insurance Provider:** {insuranceProvider}

**Policy Number:** {policyNumber}

{/hasInsurance}

{^hasInsurance}

No insurance coverage provided.

{/hasInsurance}

## Additional Participants (e.g., for family programs)

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name** | **Date of Birth** | **Age** | **Medical Conditions** |
| {#additionalParticipants}{name} | {dob} | {age} | {conditions}{/additionalParticipants} |

## Special Requests or Accommodations

{specialRequests}

## Consent & Acknowledgement

* {#acknowledgements}

**Parent/Guardian Name (if under 18):** {guardianName}

**Signature:** {signature}

**Date:** {signatureDate}