



COUNTY OF DARE
PARKS & RECREATION
 WWW.DARENC.COM
REGISTRATION FORM

Developing
Character
Promoting
Respect

PLEASE BRING FORM TO YOUR LOCAL DIVISION OFFICE:

NORTHERN BEACH

Dare County Family Recreation Park
 602 Mustian Street
 Kill Devil Hills, NC 27948
 252-475-5920

HATTERAS ISLAND

The Fessenden Center
 46830 Highway 12
 Buxton, NC 27920
 252-475-5650

ROANOKE ISLAND/MAINLAND

Lions Club Center at Westcott Park
 1000 Westcott Park Road
 Manteo, NC 27954
 252-475-5910

Participant's Name _____ Gender: Male Female

Birth date ____ / ____ / ____ Age ____ Grade ____ School _____

PO BOX _____ Physical Address _____

City _____ State NC Zip _____ Resides with _____

Medical Concerns _____

Parent/Guardian's Name _____

PHONE #'S - (H) _____ (W) _____ (other) _____

Email (optional) _____ @ _____

Insurance Co. _____ Group# _____

Knowing that the physical condition of my child is satisfactory to participate in *Dare County Parks and Recreation activities*, I hereby give permission for him/her to participate. I further accept responsibility for my child in case of injury. I hereby release the Recreation Department, Dare County, The Towns and Their Agents, Employees, the director and such other officers and/or volunteers from any liability that may occur as a result of any accident that may occur to my child. *I have attended a parents orientation session and received a copy of the Dare County Parks & Recreation Code of Conduct. By signing this document I enter into an agreement with the Parks & Recreation staff, volunteers and County government to uphold these rules and regulations and fully understand the consequences, if I/we fail to comply.*

SIGNATURE _____ Date _____

ACTIVITY / PROGRAM NAME	CLASS DAY/TIME	FEE

REFUND POLICY ~ Approved by Parks and Recreation Advisory Committee (October 10, 2007) Refunds for activities and programs will not be issued after that activities/programs registration deadline. Exceptions include medical reasons, participant moves out of the area, or if the department cancels or reschedules a program. A \$10 processing fee will still be subtracted from the refund amount. All requests for refunds must be submitted *in writing* before the start of that activity/program.

LATE FEE ~ \$5.00 WILL BE ASSESSED AFTER THE REGISTRATION DEADLINE, (UPDATED 10.07.09)

We accept Cash, Debit/Credit Cards & Checks payable to: DARE COUNTY GENERAL FUND

**** FOR OFFICE USE ONLY **** ORIENTATION DATE: ____ / ____ / ____

DATE ____ / ____ / 20__ R# _____ \$ _____ CK# _____ / CASH CC BY _____ ID# _____