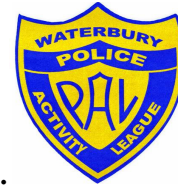
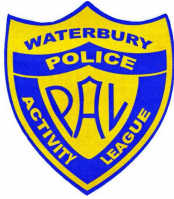


Mail this form and \$25 payment to:



Police Activity League of Waterbury, Inc.

255 E. Main St
Waterbury, Ct 06702
Telephone (203) 346-3921

Activity Registering for:

Do you receive free lunch at school Y N
Do you receive reduced lunch at school Y N

Member Information:

Name: _____
Address: _____ City: _____
State: _____ Zip: _____ Phone: (____) _____
DOB: _____ School: _____ Age as of May 1st: _____
Male Female Grade: _____ Email: _____

Parent Information:

Father's Name: _____ Work phone: (____) _____
Mother's Name: _____ Work phone: (____) _____

Please list any medical problems

Allergies: _____
Medications: _____

Person to notify in case of emergency: _____ Phone: (____) _____
(other than parent)

Doctor to notify in the event of emergency: _____ Phone: (____) _____

Exculpatory Clause

I, the parent or guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of PAL (Police Activity League). Recognizing the possibility of injury associated with these activities, I hereby release, discharge and/or otherwise indemnify the Police Activity League of Waterbury, Inc. and associated personnel, including but not limited to, the coaches, assistants, the owners of the fields and facilities used for programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the programs and/or being transported to or from the same, which transportation I hereby authorize.

Name: _____

Signature: _____ Date: _____

Please be advised that this is a preliminary application and further info may be required prior to participation. Makes checks payable to P.A.L. and place the name of your child/children in the comment section of your check.