

# Program Registration Form



**Adult Name:** \_\_\_\_\_  
**Home Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_  
**Home Phone:** ( ) \_\_\_\_\_ **Work Phone:** ( ) \_\_\_\_\_  
**Email Address:** \_\_\_\_\_ **Township/Borough:** \_\_\_\_\_

*\* Fees must be paid prior to participation. Absence from a program does not reduce the cost; there fore a credit or refund cannot be given for absences. Refunds are given ONLY if SECA cancels a program. The SECA Director must approve any Credits for medical reasons.*

NAME OF PROGRAM	PARTICIPANT'S NAME	AGE	FEE \$	START DATE
Subtotal				
3% Credit Card Fee				
<b>TOTAL</b>				

Need information about classes?  
Just call (717) 806-0123 Monday-Friday, 9 am-1 pm

Make check payable and mail to:

**SECA**  
 P.O. Box 67  
 Quarryville, PA 17566  
*(Return Check Fee of \$30.00)*

Please charge to my credit card: (Please Notes: due to the cost of this service, there is a 3% service charge per transaction.)

VISA      -   -   -      Exp. Date \_\_\_\_\_  
 MASTERCARD      -   -   -      Exp. Date \_\_\_\_\_

Signature (Required) \_\_\_\_\_ Date \_\_\_\_\_

## PERMISSION SLIP AND HOLD HARMLESS AGREEMENT

The Southern End Community Association and its staff are committed to providing high quality programs that are safe and that maximize the enjoyment one received from participation. Recreation activities, by their very nature, may present circumstances that place the person(s) in or at the activity at some risk of injury. The potential of injury varies significantly depending on the type of activity and the intensity of involvement. Any person wishing information on the potential of injury in any activity is encouraged to make contact with us at 717-806- 0123. (For adult participants) In exchange for the benefits derived by my participation in the SECA activity: (See paragraph below)

**(For minor participant) NAME OF MINOR:** \_\_\_\_\_ has my permission to participate in the above-referenced program (s). In exchange for the benefits derived by my child's participation in the SECA activity: (See paragraph below) I HEREBY AGREE TO INDEMNIFY AND HOLD SECA HARMLESS for all liability from whatever source excepting only intentional torts on the parts of its agents, or employees. Such indemnification agreement applies t/equally to Boards of Directors, officers, agents and employees of the Southern End Community Association. I give SECA my permission to use any photos or videos of me or my children for promotional purposes including social media, websites, etc.

(Signature) \_\_\_\_\_ (Print Name) \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to above minor: \_\_\_\_\_