



Grades: **K-5**

# After School Bowling



Queen Anne's County Parks and Recreation is offering After School Bowling as an fun, safe, supervised and recreation activity for students. Join us for a trip to the Easton's Bowling Centre. Cost includes transportation to and from the school parking lot, bowling and shoes. Snacks can be purchased at bowling ally for a separate fee.

**Return form to:** 1945 4-H Park Road, Centreville, MD 21617; qacrecreation@qac.org; or 443-262-4673 (fax)

**Participants Name** (first/last): \_\_\_\_\_

*(\*\*PLEASE PRINT CLEARLY—ONE FORM PER PARTICIPANT\*\*)*

M/F: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Email: \_\_\_\_\_

_____ # 190101- CEN -1	<b>Session One: Kennard Elementary; Tuesdays, March 5—April 9, 2019;</b>	<b>3:30 pm—6pm</b>	<b>\$60</b>
_____ # 190101- CEN- 3	<b>Session One: Kennard Elementary; Thursdays, March 7— April 11, 2019;</b>	<b>3:30pm—6pm</b>	<b>\$60</b>
_____ # 190101- CEN - 2	<b>Session Two: Kennard Elementary; Tuesdays, April 23— May 28, 2019;</b>	<b>3:30pm—6pm</b>	<b>\$60</b>
_____ # 190101—CEN—4	<b>Session Two: Kennard Elementary; Thursdays April 25— May 30, 2019;</b>	<b>3:30pm—6pm</b>	<b>\$60</b>

**Emergency Contact:** (name/number) \_\_\_\_\_

**\*Medical Information** (medication, disabilities, etc.): \_\_\_\_\_

**Payee** (adult/parent/guardian):

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Method of Payment: (check one)

- Cash
- Check or money order (payable to QAC Parks and Recreation)
- Mastercard/VISA Card #: \_\_\_\_\_

Exp: \_\_\_\_/\_\_\_\_ CVV/CVC#: \_\_\_\_\_ Signature: \_\_\_\_\_

I recognize the risks of illness and injury in any exercise/physical fitness or education program and am participating in the Parks & Recreation program upon the express agreement and understanding that I am hereby waiving and releasing Parks & Recreation, it's officers, directors, employees and agents from any and all claims, costs, liabilities, expense or judgment, including attorney's fees and court costs (herein, collectively "Claims") arising out of my participating in the aforesaid course/activity or any illness, injury or death resulting there from and hereby agree to indemnify and hold harmless the Parks & Recreation Department from and against all such Claims except Claims proximately caused by the gross negligence or willful misconduct of Parks & Recreation. **\*Participants may at some time be photographed for publicity purposes.**

\_\_\_\_\_  
**Parent/Guardian Signature (1)**

\_\_\_\_\_  
**Parent/Guardian Signature (2)**

If a parent or guardian does not have sole legal custody of the child, both signatures are required. By submitting a single signature, the parent/guardian is indicating that he/she has sole legal custody of the participant.