



SOMERSET COUNTY
 DEPARTMENT OF RECREATION AND PARKS
 30290 Sam Barnes Road
 Westover, MD 21871
 410.651.4980 Office 410.651.4981 Fax

AGREEMENT OF PARTICIPATION (ADULT)
 (General Activity)

Activity: _____

Name _____

Address: _____

City: _____ State: _____ Zip code _____

Home Phone # _____ Email address: _____

Date of Birth : _____ Present age: _____

Cell and/or Work Phone Number : _____

Adult: Shirt size (√ one)	<input type="checkbox"/> S	<input type="checkbox"/> M	<input type="checkbox"/> L	<input type="checkbox"/> XL	<input type="checkbox"/> XXL
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Personal Health of Participant
 (Check any that apply)

Do you have any illness or injury that might be aggravated by participation in this program? (Y or N)

Description :

ADULT PARTICIPANTS ONLY

I hereby relieve the above mentioned organization, its staff and instructors from any responsibility for any bodily injuries, etc., that may incur by myself as a result of participation in this program and/or activity.

Signature: _____ Date: _____

Witness: _____ Date: _____

PERMISSION FOR USE OF PICTURES

We may be using various pictures of events and programs held on our website, brochures or newsletter and would appreciate your permission to use pictures of you. Please sign below giving your permission.

Signature: _____ Date: _____