

# Plymouth Community Education and Recreation Registration Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ (circle: home/work/cell)

E-mail address: \_\_\_\_\_

Please provide your e-mail address if you would like to receive information about future classes.

Course title: \_\_\_\_\_ Day and time: \_\_\_\_\_ Fee: \$ \_\_\_\_\_

Course title: \_\_\_\_\_ Day and time: \_\_\_\_\_ Fee: \$ \_\_\_\_\_

Course title: \_\_\_\_\_ Day and time: \_\_\_\_\_ Fee: \$ \_\_\_\_\_

### No registration is complete until fees are paid.

Make checks payable to and mail or bring registrations to:  
Community Education, 125 Highland Ave., Plymouth WI 53073

### WAIVER STATEMENT

The participant/parent/guardian assumes all responsibility in case of injury or harm to participant. The Plymouth School District, its employees or agents or any volunteers/organizations associated with this activity will not be held responsible for any personal injury or loss that may occur in conjunction with this activity.

\_\_\_\_\_  
DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of participant or parent/guardian if under 18

Scholarships: If you are interested in taking a class and are unable to pay the fee, contact the Community Education and Recreation Office for financial assistance information.

### FOR OFFICE USE ONLY

Date \_\_\_\_\_ Amount \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_