



# HUNTINGTON PARKS AND RECREATION DEPARTMENT

## S.P.A.R.K. 2022 - DETECTIVES

**KINDLY FILL OUT THIS PORTION OF THE REGISTRATION FORM**

Child's Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

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

Park Location (circle one):    Memorial Park                  Drover Park                  General Slack Park

( ) Yes, I will allow pictures of my child to be taken **and** posted on social media.

( ) No, I do not allow pictures of my child to be taken.

### **CONTACT DETAILS IN THE CASE OF AN EMERGENCY**

Name of Emergency Contact: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Phone Number: \_\_\_\_\_

List any physical limitations, health/behavioral problems, medications, allergies and any other information our S.P.A.R.K. Directors need to be aware of during this program:

\_\_\_\_\_  
\_\_\_\_\_

I/We the undersigned parent(s) or guardian hereby authorizes my son or daughter to participate in the Huntington Parks and Recreation Department's summer program, S.P.A.R.K., and release its representatives from any suit, judgement, injury claim or demand which might result from the participation of my son or daughter in the Huntington Parks and Recreation Department's S.P.A.R.K. Program.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### **OFFICE USE ONLY**

**Paid\$:** \_\_\_\_\_ **Payment Form:** \_\_\_\_\_ **Receipt #:** \_\_\_\_\_