

# SALEM TOWNSHIP RECREATION BOARD APPLICATION FORM

Event	Team/Group	
Child's Name	Age	Birthdate
Address	City	Phone Number
School District	Twp/City/Boro of Residency	
Emergency Contact Person	Phone Number	

I/we, the parents/guardians to the above named child who is a candidate for participation in the event of the Salem Township Recreation Board, hereby give my/our approval to his/her participation in any/all activities relating to the above named event during this season. I/we do hereby waive, release, absolve, indemnify and agree to hold harmless the Salem Township Recreation Board, the organizers, sponsors, directors, supervisors, participants and persons transporting my/our child to or from activities, for any claim and/or expense for defending any claim arising out of any injury to my/our child.

I/we certify that the above named child is in good health and has no physical condition which could endanger his/her well being by participation in the above-named event.

I/we will furnish a certified birth certificate of the above named child upon request of any official.

If special payment arrangements are needed, approval by a recreation board member must be obtained.

Make Checks Payable to:  
Salem Township Recreation Board

\_\_\_\_\_  
Signature – Parent/Guardian

\_\_\_\_\_  
Date

City/Borough/Township in which you reside: \_\_\_\_\_

School District (Please Check One)

\_\_\_\_\_ Blairsville/Saltsburg      \_\_\_\_\_ Derry

\_\_\_\_\_ Franklin Regional      \_\_\_\_\_ Kiski Area

\_\_\_\_\_ Greensburg Salem      \_\_\_\_\_ Latrobe

Fee Paid:      \_\_\_\_\_ Cash      \_\_\_\_\_ Check

<b>FEE SCHEDULE</b>		
<b>Class</b>	Resident	Non-Resident
<b>Kinder-Gym</b>	\$155.00	\$180.00
<b>Basic Beginner</b>	\$170.00	\$195.00
<b>Advanced</b>	\$180.00	\$205.00
<b>Beginner</b>		
<b>Intermediate</b>	\$200.00	\$235.00
<b>Pre-Team</b>	\$240.00	\$275.00
<b>Team</b>	\$275.00	\$320.00

**10% Discount per child for families of two or more children.**

**Person Accepting Payment:**