Registration Form: Aquatics, Fitness, Recreation Programs

Family Information												
phone number email		email							l wo	uld like to receive en progran yes	mail updates regarding ns, events, and services O no	
address unit/apt.				city					postal code			
parent/guardian name				birth date cell phone number				Have you changed address?				
										🔿 yes	() no	
parent/guardian name			birth date		cell phone		number		Have you cha	Have you changed address?		
										⊖ yes	() no	
Participant 1												
last name			first name			birth date					gender	
				(M)				_(D)(Y)		_		
Program Name / Swim Level			ocation	Day			Time		Activity #	Fee		
1st Choice												
2nd Choice												
special needs/ allergies	Is there a special need or allergy (including peanut) our programmers should be aware of? Please provide details:											
Participant 2												
last name			first name				birt	h date			gender	
						(M)			(D)(Y)			
Program Name / Swim Level			Location						Time Activity #		Fee	
1st Choice												
2nd Choice												
special needs/ allergies	Is there a special need or allergy (including peanut) our programmers should be aware of? Please provide details:											
Payment O debit O cheque payable to: City of Pickering												
Visa / MasterCard							I hereby release the City of Pickering from all claims arising from any accidents or injury which are caused by or arise					
expiry date amount to				charge \$ from parti program, o				icipation of the applicant named above during any or in any facility or at any location where the				
card holder name									is being held.			
signature								signature	<u>.</u>			
How are you going to register today? Online at pickering.ca/active Fax with a credit card number to 905.831.9370 Drop-off, Mail, or In Person: Chestnut Hill Developments Recreation Complex (1867 Valley Farm Road)												

Personal information contained on this form is collected under the authority of the Municipal Act. This information is collected and will be used for the purpose of program registration. Any questions related to the collection of this information should be directed to the City Clerk at One The Esplanade, Pickering ON L1V 6K7 or 905.420.4611