



Red Bank Parks and Recreation Multi-Season Registration

90 Monmouth St. Red Bank, NJ 07701 • 732-530-2782 • rbparksandrec@redbanknj.org
online registration <https://register.capturepoint.com/redbank> (CREDIT CARDS ONLINE ONLY)

CHILD INFORMATION

Full Name: _____ DOB: __/__/____ Genre (circle): M / F Shirt Size(Circle): YS YM YL AS AM AL

Grade: _____ (When program starts) School Attending: _____

List any health Conditions/Allergies we should know about: _____

Photo Release: YES __ NO __. The Recreation Department Officials can take pictures of my child for advertising purposes.

Transportation: YES __ NO __. If needed, I grant permission for my child to be transported by Parks and Recreation Officials.

PARENT/GUARDIAN INFORMATION

Full Name: _____ Home Phone: _____ - _____ - _____ Email: _____

Address: _____ (Street, Town, State, Zip)

Work Phone: _____ - _____ - _____ Cell Phone: _____ - _____ - _____ Volunteering to Coach/Assist? YES NO

Emergency Contact Name: _____ Emergency Contact Phone: _____ - _____ - _____

PROGRAM/ACTIVITY INFORMATION — FEES RED BANK RESIDENT/OTHER TOWN

CHECK BOXES

SPRING SEASON

Baseball

- T-ball Coed PreK—1st \$55/\$70
- U7/8 Prospect \$60/\$70 U9 Rookie \$75/\$100
- U10 Minor \$75/\$100 U11/12 Major \$75/\$100
- U13/14 Junior \$75/\$100

Softball

- T-ball Coed PreK—1st \$55/\$70
- Grades 2-3 \$60/\$70 Grades 4-5 \$75/\$100
- Grades 6-7 \$75/\$100 Age 13-16 \$75/\$100

Track and Field

- Ages 5—18
- \$50 Red Bank
- \$75 Other

SUMMER/FALL SEASON

Outdoor Basketball

- See Flyer for evaluation and/or skill sessions
- Grades K-4 Coed \$75/\$100
 - Grades 5-8 Coed \$75/\$100

Outdoor Soccer

- Soccer Clinics (Ages 3-5) \$45/\$65
- Soccer Instructional (Grades K-2) \$50/\$70
- Recreation League (Grades 3-8) \$60/\$80

OTHER PROGRAM

ACTIVITY:

WINTER SEASON

Indoor Basketball

- Team practices begin in September. Games Start in January
See Flyer for evaluation and/or skill sessions
- Biddy Basketball (Grades K-4) \$55/\$100
 - Fusion In-house League (Grades 5-8) \$55/\$100

Indoor Soccer

- Register by November. Season starts in January
- Instructional (Pre-K—Kindergarten) \$50/\$75
 - Recreation Indoor League (Grades 1-8) \$60/\$85

NOTES:

Fee: \$ _____

\$5 DISCOUNT FOR EACH ADDITIONAL CHILD

ALL PROGRAMS DEPEND ON VOLUNTEERS

REGISTER EARLY PAY LATER

IMPORTANT: Program/Activity information may not be available at the time, check back as the season is closing in. Fees are subject to change.

For more information, visit our website www.redbanknj.org or email osalinas@redbanknj.org

Agreement and Signature Required. By submitting this application, I certify that I am the parent/guardian of the child listed above and give permission for him/her to participate in the programs selected. This agreement is made upon the condition that I assume all risks and hazards incidental to my child's participation and do hereby waive, release, absolve, indemnify, and hold harmless the Borough of Red Bank, the Department of Parks and Recreation, and its agents and employees for any claim arising out of injury to the child listed on this registration form. I acknowledge that children are expected to follow the Code of Conduct which can be found on the Borough website. I confirm the child is in good physical condition and does not have medical issues that could be aggravated by their participation. **In case of a medical emergency, I give permission for treatment by a hospital or physician. I give permission to the Red Bank Parks and Recreation staff and agents to transport my child to recreation events. I accept that no refunds will be issued.**

Parent/Guardian Signature: _____ Date: _____

OFFICE ONLY Family ID: _____ Exempt Code: _____ Scholarship/Financial AID: __Submitted __Approved ___% OFF

Acct Balance: _____ Past Season Fees due: _____ Official Initials: _____ NOTES: _____



Red Bank Parques y Recreación Registración Multi-Temporada

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Inscripción en-linea <https://register.capturepoint.com/redbank> (Tarjetas de Credito en-linea Solamente)

INFORMACIÓN DEL NIÑO/A

Nombre: _____ **Fecha de Nacimiento:** ___/___/___ **Genero** (circule Uno): M / F
Grado: _____ (al inicio del programa) **Escuela:** _____ **Talla de Camisa** (Circule Uno): YS YM YL AS AM AL
List alguna Condición de Salud/Alergias que deberíamos Saber: _____
Liberación de Foto: SI ___ NO __. Representante de Recreación puede tomar fotos de mi hijo/a para uso de anuncios o prensa.
Transportación: SI ___ NO __. De ser necesario, permito que mi hijo/a sea transportado por representantes de Recreación.

INFORMACIÓN PADRE/GUARDIÁN

Nombre: _____ **Tel Casa:** _____ - _____ - _____ **Tel Trabajo:** _____ - _____ - _____
Dirección: _____ (Calle, Pueblo, Estado, Codigo)
Correo Electronico: _____ **Tel Celular:** _____ - _____ - _____
Voluntario a Ayudarnos? SI NO **Contacto de Emergencia:** _____ **Tel Contacto de Emergencia:** _____ - _____ - _____

INFORMACIÓN DE PROGRAMA/ACTIVIDAD — PAGOS RED BANK RESIDENTES/OTRO PUEBLO MARQUE PARA ELEGIR

TEMPORADA DE PRIMAVERA

Baseball <input type="checkbox"/> T-ball Niños/as PreK-1 ^{ro} \$55/\$570	Softball	Track and Field
<input type="checkbox"/> U7/8 Prospect \$60/\$70 <input type="checkbox"/> U9 Rookie \$75/\$100	<input type="checkbox"/> T-ball Niños/as PreK-1 ^{ro} \$55/\$70	Edades 5—18
<input type="checkbox"/> U10 Minor \$75/\$100 <input type="checkbox"/> U11/12 Major \$75/\$100	<input type="checkbox"/> Grados 2-3 \$60/\$70 <input type="checkbox"/> Grados 4-5 \$75/\$100	<input type="checkbox"/> \$50 Red Bank
<input type="checkbox"/> U13/14 Junior \$75/\$100	<input type="checkbox"/> Grados 6-7 \$75/\$100 <input type="checkbox"/> Edades 13-16 \$75/\$100	<input type="checkbox"/> \$75 Otro

TEMPORADA DE VERANO/OTOÑO

Baloncesto	Fútbol	ACTIVIDAD:
Ver folleto aparte para evaluaciones y/o entrenos	<input type="checkbox"/> Soccer Clinics (Edades 3-5) \$45/\$65	_____
<input type="checkbox"/> Grados K-4 Niños/as \$75/\$100	<input type="checkbox"/> Fútbol Instruccional (Grados K-2) \$50/\$70	_____
<input type="checkbox"/> Grados 5-8 Niños/as \$75/\$100	<input type="checkbox"/> Liga Recreacional (Grados 3-8) \$60/\$80	_____

TEMPORADA DE INVIERNO

Baloncesto	Fútbol de Sala	NOTAS:
Entrenos comienzan en Septiembre. Juegos comienzan in Enero	Registrese en Noviembre. Temporada inicia en Enero	_____
Ver Folleto aparte para evaluaciones y/o entrenos	<input type="checkbox"/> Instruccional (Pre-K—Kindergarten) \$50/\$75	_____
<input type="checkbox"/> Biddy Basketball (Grados K-4) \$55/\$100	<input type="checkbox"/> Fútbol de Sala Recreacional (Grados 1-8) \$60/\$85	_____
<input type="checkbox"/> Fusion In-house League (Grados 5-8) \$55/\$100		_____
		COBRO: _____

\$5 DE DESCUENTO POR NIÑO/A ADICIONAL

TODOS LOS PROGRAMAS DEPENDEN DE VOLUNTARIOS

REGISTRESE TEMPRANO PAGUE LUEGO

IMPORTANTE: Información de programa posible no este disponible al momento, regrese antes de inicio de temporada. Precios son sujetos a cambiar.
Para mas información, visite nuestro sitio web www.redbanknj.org o por correo electronico osalinas@redbanknj.org

Acuerdo y Firma Requeridos. Al enviar esta aplicación, certifico que yo soy el padre/guardián del niño/a mencionado arriba y doy permiso para que él/ella participe en los programas seleccionados. Este acuerdo se hace en la condición que yo asumo todos los riesgos y peligros casuales por la participación me mi hijo/a y por este medio renuncio, libero, absuelvo, indemnizo, y me mantengo inofensivo hacia Borough de Red Bank – Departamento de Parques y Recreación, sus agentes y empleados por cualquier reclamo surgido de lesiones al niño/a en este formulario de registraci3n o inscripci3n. Yo reconozco que es esperado de los chicos a seguir el C3digo de Conducta en cual se puede encontrar en el website de Borough. Confirmo que el ni1o/a esta en buena condici3n f3sica y no tiene condiciones m3dicas que puede agravarse por su participaci3n. **En caso de una emergencia m3dica, yo doy permiso para que el hospital o medico proceda con el tratamiento. Yo doy permiso a Parques Y Recreaci3n de Red Bank para que transporten mi ni1o/a a eventos de recreaci3n. Yo acepto que no se emitira ningun reembolso.**

Padre/Guardián Firma: _____ **Fecha:** _____

OFFICE ONLY Family ID: _____ Exempt Code: _____ Scholarship/Financial AID: ___Submitted ___Approved ___% OFF
Acct Balance: _____ Past Season Fees due: _____ Official Initials: _____ NOTES: _____