



**HARTLAND RECREATION DEPARTMENT  
REGISTRATION FORM**

210 COTTONWOOD AVE, HARTLAND, WI 53029  
262-367-0352  
WWW.VILLAGEOFHARTLAND.WI.GOV

Please print legibly and fill out completely.

**REGISTRATION DETAILS**

NAME: \_\_\_\_\_ PARENT/GUARDIAN NAME: \_\_\_\_\_  
BIRTHDATE: \_\_\_\_\_ GENDER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ THIS NUMBER CAN RECEIVE TEXT MESSAGES: \_\_\_YES \_\_\_NO  
EMAIL: \_\_\_\_\_  
EMERGENCY CONTACT NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**PROGRAM DETAILS**

CLASS: \_\_\_\_\_ DATES: \_\_\_\_\_ TIME: \_\_\_\_\_ FEE: \_\_\_\_\_  
CLASS: \_\_\_\_\_ DATES: \_\_\_\_\_ TIME: \_\_\_\_\_ FEE: \_\_\_\_\_  
CLASS: \_\_\_\_\_ DATES: \_\_\_\_\_ TIME: \_\_\_\_\_ FEE: \_\_\_\_\_

**PAYMENT DETAILS**

CASH OR CHECK (payable to the Village of Hartland) \$ \_\_\_\_\_  
CREDIT CARD NUMBER (a 4% convenience fee will be charged for all credit card payments): \_\_\_\_\_  
EXPIRATION DATE: \_\_\_\_\_ CVV/CVC: \_\_\_\_\_  
NAME ON CARD: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

All Hartland Recreation Department participants are asked to sign this liability release and consent to use of images. A custodial parent or guardian must sign for any minor. I the undersigned, do hereby agree to allow the above-named to participate in the activity indicated. I am aware of and understand that there may be potential risks inherent with participating in any recreational activities and that the Village of Hartland does not provide accident or health insurance coverage for any participant. I assume all risks and hazards incidental to such participation including transportation to and from the activities and do hereby waive, release, absolve, indemnity and agree to hold harmless the Village of Hartland, its officers, employees, staff, agents and other contract instructors for any and all claims, injuries, liabilities, damage or cause of action directly or indirectly arising out of the use of Village of Hartland facilities, equipment, and/or participation in Village of Hartland Recreation Department programs/activities. However, in the event of a medical emergency, I authorize the Village of Hartland staff to obtain medical treatment for the above-named participant. I consent and give permission for all images of myself and the above-named participant to appear in media/promotion/information materials approved by the Village of Hartland without any payment or consideration. This consent/grant of use of images includes but is not limited to the distribution/publication by any means including but not limited to the Internet, and by means of e-mails, magazines, newsletters, pamphlets, news articles, advertisement flyers, and in whatever other manner the Village of Hartland finds useful or utilizes for any other lawful purpose. This release shall continue indefinitely, until I otherwise revoke said release in writing. In the event of a revocation, I agree that the Village will not initiate any new use of images of myself or the above named participant within any new material(s) after the date of actually being notified of my revocation, but will not be obligated to withdraw or retract any distribution, circulation or publication of any existing material(s) containing any image of or information about myself or the above named participant.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_