

**Morris Beach and Recreation Department**  
**109-21 East Street, Morris, CT 06763**  
**860-567-7437 ~ [Morrissrctr@optonline.net](mailto:Morrissrctr@optonline.net)**

**General Registration and Emergency Release Form**

By signing this form, I waive all claims against the Town of Morris, its' Beach and Recreation Department and all personnel from any and all liability for any injuries, loss or other claims resulting from participation in this activity. If I cannot be reached, I give permission for the Physician selected by the Beach and Recreation Department to hospitalize, secure proper treatment for and to order injection, anesthesia or surgery for myself or my minor child.

Program / Activity: \_\_\_\_\_ Fee enclosed: \_\_\_\_\_

Signature (Parent, if minor): \_\_\_\_\_ Date: \_\_\_\_\_

Participant's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Town / Zip: \_\_\_\_\_ Best Phone #: \_\_\_\_\_

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

Emergency Name / Phone: \_\_\_\_\_

Allergies or other factors the Beach and Recreation Department should be aware of:

\_\_\_\_\_

Comments: \_\_\_\_\_

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