

Activity Registration Form



Killingly Parks and Recreation
185 Broad Street Killingly CT, 06239

All forms must be accompanied by full payment. Mail in or drop off to the above address.
Office Hours: Monday-Friday 8:30am – 4:30pm

Registration Policies: Include right to cancel class if there is low enrollment, and reminder that there is limited registration on certain programs so register early to avoid missing out on a class or program.
Program Waiver: The undersigned individual and/or as parent or guardian of the named child do hereby agree to waive, release and hold harmless the Town of Killingly and its agents and employees from any and all causes of action including injury and property damage.

(Please Print)

Name of Participant _____ M/F _____ DOB _____

School _____ Grade _____ Name of Parent(s) _____

Address _____ City _____ State/Zip code _____

Course Name _____ Day/Time _____ Fee\$ _____

Cell _____ /Cell Provider *To receive Text for cancelations _____

Home Phone _____ Work/Day Phone _____

Emergency Contact _____ Emergency Contact Phone _____

Special Considerations: _____

Parent /Guardian Signature: _____ Parent DOB _____

Authorized Pick-up Person(s) _____

Email Address: _____

Payment Method (check one) Cash Check (Make Payable to "KPRD")