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"Life is simple - Eat, Sleep, PLAY!"

SECA PROGRAM REGISTRATION FORM

Program 1: _____ Start Date: _____

Participant(s):

_____ Age: _____ Shirt size: _____ Fee: _____
(select programs) *indicate youth or adult size

_____ Age: _____ Shirt size: _____ Fee: _____
(select programs) *indicate youth or adult size

Program 2: _____ Start Date: _____

Participant(s):

_____ Age: _____ Shirt size: _____ Fee: _____
(select programs) *indicate youth or adult size

_____ Age: _____ Shirt size: _____ Fee: _____
(select programs) *indicate youth or adult size

Total Fees enclosed: _____ (circle one) check cash

Credit Card Mastercard Visa Discover

Credit Card Number: _____ Exp. Date: _____

For minor participants, parent/guardian name: _____

Address: _____

Home Phone: _____ Alternate Phone: _____

Email: _____

SECA does not share or sell registration information.
Fees must be paid prior to participation. Fees are non-refundable unless program cancelled by SECA
Make checks payable to: SECA. Fee for returned checks.

Permission/Hold Harmless Agreement

The Southern End Community Association is committed to providing safe, high-quality programs to the community. As with any recreational activity, there is the risk of potential injury to participants. Anyone wishing to participate in SECA's recreational programs agrees to indemnify and hold SECA harmless for all liability from whatever source excepting only intentional torts on the part of its agents or employees. This indemnification agreement also applies to SECA's Board of Directors, officers, agents and employees of the Southern End Community Association.

I hereby understand and agree to the above indemnification statement.

Adult Participant signature: _____

Parent/Guardian of minor participant signature: _____