

SKATEPARK OVERNIGHT REGISTRATION

I give permission for _____ to participate in the overnight party on December 31, 2019 – January 1, 2020.

I understand this is a “lock-in”. The doors will be locked from 10:00pm – 6:30am.

Should an emergency happen, the only time any person will be allowed in or out of the facility will be with an escort by The Eldridge Police Department, set up through the Community Center management.

I understand all reasonable safety precautions will be taken at all times by Community Center staff to maintain the well being of all participants. I authorize medical treatment for any injury deemed necessary by Community Center management.

All guest MUST be picked up at 7:00am on January 1, 2020.

Parent / Guardian PRINTED name: _____

Parent / Guardian SIGNATURE: _____

Emergency Information

1. Name & Phone Number: _____

2. Name & Phone Number: _____

Hospital of Choice: _____

Allergies: _____

Pre-register by 12/29/19- \$30.00 _____ Registration on or after 12/30/19 \$35.00 _____