



Program Policy Form 2022

Questions must be answered for each program participant.

PARKS & RECREATION

Account Name _____

Program Session _____

I agree to follow all program rules, Freedom Park and Freedom Lake rules.

Yes

No

I give permission for the Town of LaGrange program staff to administer first aid if the participant is injured.

Yes

No

I understand the Town of Lagrange reserves the right to photograph, video picture and/or other digital reproduction program participants for publicity purposes. Please be aware that these photos are for LaGrange Parks and Recreation use only and may be used in future catalogs, brochures, flyers, etc and/or on social media/website.

Yes

No

I understand I will get 50% of my program fee refunded if cancellation request is made in writing 6 weeks or more prior to program start date (first day of first session of program or event). There is NO refund for cancellations made within the 6 weeks.

Yes

No

I understand there are NO refunds due to, but not limited to, inclement weather, illness, acts of God, behavior issues, non-usage, or closure from the department

Yes

No

If registered for the swim team program, I give my child permission to be released to swim team after day camp ends at 4.

Yes

No

N/A

What is your T-shirt size? _____

What is your swim level? _____

While we cannot make promises, the camp will do its best to honor request for a friend in the same group. Restrictions apply. _____

Anything else you would like us to know?

Signature _____ Date _____