

Teen Center
Mentor/ Parent/ Guardian Information

This facility is open to youth grades 6-12

Name _____ Phone _____

Circle one Male Female

Address _____ Town _____

Agency Representing _____

Agency Phone/ Contact _____

E-mail address _____

Work Phone _____

Teens name _____

Adult Mentor/Parent/ Guardian Responsibilities

While visiting the center as a mentor or parent you are responsible for the behavior of those you are supervising. The center staff is responsible for the center as a whole. All adult visitors are expected to supervise those you come with. All center guidelines are to be followed by all who attend. We thank you for your support and efforts to improve these young peoples lives. For a complete list of guidelines please see staff or a youth registration form.

Center Guidelines

- *Possession or use of alcoholic beverages or illegal drugs is prohibited.*
- *No Smoking allowed in or around the center or skate park.*
- *Foul Language is not acceptable.*
- *Rights and safety of all others must be respected at all times.*
- *Participants must follow staff direction for supervision.*

Signature _____

Date _____

BIDDEFORD RECREATION DEPARTMENT
P. O. Box 586
BIDDEFORD, MAINE 04005
PHONE 207-283-0841 FAX 207-286-0575

Please read carefully

Release

I understand there are risks of physical injury in participating in sports and recreational activities or programs.

I hereby release the City of Biddeford, its employees, officials and agents from any and all liability or loss or damage to personal property that, my child or I may experience in connection with activities sponsored by Biddeford Recreation Department.

I hereby consent to emergency medical procedures deemed advisable for my child in the event I cannot be reached and my child has sustained an injury. The Dept. does not provide accident or hospitalization insurance for participants of its programs. All participants are advised to have adequate personal coverage. Please consider participant's own health, experience, and tolerance for risk before participating in any program. I also consent to the use of me or my child's photo, video, artwork etc. by the dept for flyers, presentations etc.

This release and consent shall remain in full force and effect for all future recreational activities and programs until revoked in writing by registrant.

Signature

Date

Name Printed