

Schuylkill Haven Halloween Participation Form

All participants of your group must complete this form.

Please return on or prior to the night of the parade. Failure to do so will result in being held out of the parade.

Name of Organization: _____

Participant Name: _____

Email: _____

Emergency Contact Name & Phone: _____

Please read carefully and sign.

- **NO CANDY MAY BE THROWN!** However, walking participants may hand out candy.
- **NO POLITICAL ENDORSEMENT OR SIGNS, NO EXCEPTIONS.**
- During staging, each will be responsible to clean up after themselves prior to departing on the parade route. *Any areas left dirty with trash will prohibit future participation from your group.*
- A Rules & Regulations guide will be emailed to the contact person. **This will signify your registration has been received and approved.**
- The registration form must be completed and dropped off at the or mailed to the **Schuylkill Haven Recreation Center Attn: Halloween Parade 340 Haven Street Schuylkill Haven, PA 17972**
Or via Email to: havenrec@comcast.net

I agree to abide by the rules, policies and decisions of the Schuylkill Haven Borough and the Schuylkill Haven Recreation Department. I acknowledge and confirm that I have the requisite skills, qualifications, physical abilities and training necessary for me to safely participate in this parade. I give permission for the Schuylkill Haven Borough and the Schuylkill Haven Recreation Department to use any photographs taken of me during the the event to social media, and websites, etc. I recognize the possibility of physical injury to myself by participating in the Schuylkill Haven Halloween Parade. In consideration for the Borough allowing me to participate in this parade, I hereby knowingly and voluntarily release the Borough of Schuylkill Haven, the Schuylkill Haven Recreation Department and all its agents, employees and officers from and against any and all claims, losses, damages, liability or expense occurring to any of my property, or for personal injury or death which may result from my participation in the parade, including injury or death that may be caused by the Borough of Schuylkill Haven, the Schuylkill Haven Recreation Department and all of its agents, employees and officers negligent actions. I assume all liabilities and injury that may result because of my participation in the parade.

Signature: _____ Date: _____

If I am the parent/guardian, I acknowledge that I am the parent or legal guardian of the registrant and that I have authority to bind my child to the terms of this release and waiver. _____

Parent/Guardian Name (Please Print): _____ Date: _____

Parent/Guardian Signature: _____ Date: _____