



Quilting Class Registration



SEPTEMBER 29TH—NOVEMBER 3RD

Name _____

Address _____

Phone _____ Age _____

Parent/Guardian Contact _____ Ph. _____

Participant/Guardian Signature _____ Date _____

Cash / Check No. _____

\$35 for 6 Week Course Paid _____ Taken by _____
DATE

Checks Payable to Village of Turtle Lake Parks & Rec.

Return Completed Registration Form to: TL Village Hall - 114 Martin Ave East - PO Box 11 - Turtle Lake WI 54889



Turtle Lake Parks & Recreation Program 2010 Quilting Class



Acknowledgement and Consent Form Village of Turtle Lake, Wisconsin



I, _____, understand that every individual and/or organizational participant of the Village of Turtle Lake Parks & Recreation Program assumes their own risk for recreational activities provided for under said program.

I further accept the responsibility for any physical or other injury resulting from activities under this recreational program and therefore agree to hold harmless both the Turtle Lake School District and the Village of Turtle Lake for any and all damages resulting from participating in the aforementioned activities.

Signature of the Participant / Participant's Parent or Guardian:

_____ Date Signed: _____

****Please Note:** If you have any questions related to the content of this document, please contact the following program representative:
Village of Turtle Lake · Danielle Maxwell-Parker - Community Development Director · Phone: 715-986-2241
Email: asst@turtlelakewi.com