

# General Information

## Registration Information

Registration for all programs may be made in person at the Recreation Department, 21311 Telegraph, Brownstown, by phone with full payment on a credit card, or by completing the form below and submitting with full payment to:

Brownstown Recreation  
21311 Telegraph Road  
Brownstown, MI 48183

All Program fees include a \$1.00 per participant administration fee. This fee is used to help off set the costs of running the Recreation Department and help the Department remain self sufficient.

Non-Residents are welcome in most programs and will be charged an additional \$5.00 non-resident fee.

## Fee Waivers Available

It is the policy of the Brownstown Recreation Commission that no Brownstown resident child will be turned away from a program due to the inability to pay a program registration fee.

If your child wishes to participate in any program, and you are unable to pay the registration fee, please request a fee waiver application from Parks & Recreation Director Mark W. Maxe at (734) 675-0920. All requests are handled confidentially.

## Satisfaction Guaranteed

If, for any reason, you are not fully satisfied with any program, a full refund of the program registration fee will be issued upon request. Just stop in the Recreation Department

and tell us why you were dissatisfied with the program, and a full refund will be issued.

## Program Suggestions

Ideas and suggestions for new programs are always welcome. If you have a particular program or event you would like to see offered by Brownstown Recreation, please contact Parks & Recreation Director Mark Maxe at (734) 675-0920.



# Program Registration Form

Name _____		Sign up for:	Price
Address _____			
_____		<input type="checkbox"/>	_____
_____		<input type="checkbox"/>	_____
_____		<input type="checkbox"/>	_____
Phone _____		<input type="checkbox"/>	_____
Method of Payment	<input type="checkbox"/> Visa	<input type="checkbox"/>	_____
	<input type="checkbox"/> MasterCard	<input type="checkbox"/>	_____
	<input type="checkbox"/> Check Enclosed	<input type="checkbox"/>	_____
Credit Card # _____	Exp. date _____	Total	_____
Signature _____			

### Liability Waiver - Please Read Carefully

In consideration of the acceptance of my registration in the above program(s) I do hereby, for myself, my heirs, executors and administrators, waive release and forever discharge any and all rights and claims for damages which I may have or which hereafter accrue to me against all municipalities special districts, and properties through which the program(s) will be held or its respective officers, instructors, administrators, successors, and/or assigns for any and all damages which may be sustained or suffered by me in connection with my said participation in the above program(s). I further represent that I am in good physical condition and have no disability or ailment that will prevent me from engaging in the activity for which I am registered.

Signature & Date \_\_\_\_\_