

## West Linn Parks and Recreation Fall Barn Dance Registration

### DANCE PARTICIPANT:

*In order to participate in this dance and future opportunities the following rules and other deemed necessary by chaperones, will be strictly followed:*

*I will behave at the City of West Linn hosted dance in an appropriate manner and treat others with kindness and respect.*

*I will not touch others. With the exception of specific permission and as appropriate during a slow dance.*

*I will stay in the building.*

*I will obey the chaperones.*

*I will have FUN!*

**Participant:** \_\_\_\_\_ **Date:** \_\_\_\_\_, 2013

### PARENT/GUARDIAN AGREEMENT:

*I will pick-up my participant promptly at 9pm.*

*I will promptly pick-up my participant if contacted during the event if asked to do so.*

*I will remain with my participant at the event if he/she has medical, emotional or other issues putting them or others at risk.*

*I authorize emergency medical support for my participant if it is deemed necessary.*

**Medical conditions? (Diabetes, seizures, asthma, allergies, etc...) Yes/ No**

**If yes, please specify:**

\_\_\_\_\_

**Parent/Guardian:**

\_\_\_\_\_ **Date:** \_\_\_\_\_, 2013

**Emergency contact printed name & phone numbers**

\_\_\_\_\_

**Email address for future activity notification:**

\_\_\_\_\_

