

Morris Plains Recreation Presents: 2021 Summer Theatre



PARTICIPANT'S NAME: _____ PHONE: _____

ADDRESS/TOWN: _____ GRADE / AGE (FALL , 2021): _____

EMAIL: _____ TEE SHIRT SIZE: _____

Please Note: All Covid-19 protocols recommended by the CDC will be implemented throughout this program.

I hereby release any claims I may have for myself against the Borough of Morris Plains, its employees and volunteers for any injury that may occur during this activity

Signature

Date

REGISTRATION FOR SUMMER THEATRE - BY MAIL OR MAIL SLOT - NO IN PERSON REGISTRATIONS
Mail or deliver to mail slot this completed Registration Form, Emergency Medical Information Form & Fee to:
Morris Plains Community Center, 51 Jim Fear Drive, Morris Plains, NJ 07950
Checks payable to "Borough of Morris Plains"

Policy for refunds posted at the Morris Plains Community Center and at www.morrisplainsboro.org

Sponsored by the Morris Plains Recreation Commission

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