Town of Stony Point Recreation
5 Clubhouse Lane Stony Point NY
Registration Form

Child/Participant_____

ADDRESS_____

DOB_____ Age_____ Grade_____

TELEPHONE_____ CELL _____

EMAIL_____

Emergency Contact_____ Phone_____

Program... Swim Lessons

FEE $ 125.00 Session_____

PLEASE MAKE CHECKS PAYABLE TO: Town of Stony Point

** I hereby give consent for my child to participate in the program indicated.

I give permission for pictures to be taken of my child

_____Yes _____No

Signature of Participants Parent/Guardian

_____

Any questions call Karenanne Nigro at (845) 947-5261
or email knigro@townofstonypoint.org