



Wauwatosa School District
Recreation Department
11324 W. Center Street
Wauwatosa, WI 53222
tosarec@wauwatosa.k12.wi.us

(414) 773-2900
FAX (414) 773-2920
www.tosarec.com

Wauwatosa Active Older Adults Membership 2022

Registration Form (Activity #663000-22)

\$15 Resident \$20 Non-Resident (Make checks payable to: Wauwatosa Recreation Dept.)

Name: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Birthday (Month/Day/Year): _____

Cell Phone: _____ Email Address: _____

Are you interested in having your name/address/phone posted in a directory? Yes No

I, the undersigned, do hereby understand that I have registered the individuals named herein to participate in the aforementioned activity (ies) and I further agree to indemnify and hold harmless the Wauwatosa Recreation Department and its employees, officers and agents from and against any and all liability. In addition, I understand that this requested program, like all activity has some inherent risk involved. Furthermore, the individuals named herein are in good physical condition appropriate for the slated activity (ies) and that participants must assume full responsibility for injuries incurred while taking part in an activity. No accident insurance is provided by the Wauwatosa Recreation Department. I/We have read and agree to the registration and program policies.

Signature: _____ Date: _____

Medical Information

Emergency Contact Person: _____

Emergency Contact Phone: _____

Medications: _____

Allergies: _____