City of Franklin
Parks

VOLUNTEER REGISTRATION FORM

Family Day
Date: November 2, 2019

Adult Form

Please Print

Full Name___________________ T shirt Size _________________________

Address___________________ City/State____________________ Zip________

Email Address ______________________________________________________

Cell Phone Number______________________ Additional Phone Number ___________________

Hours Available: 8am-3pm 8am-12pm 11:30am-3pm

May we add you to our email list to send you information about future events and activities? Yes   No

In Case of an Emergency:

Name: __________________ Phone number: __________________

Release and Waiver:
I/We the parents/legal guardian of the above child, participating in a program sponsored by the City of Franklin, hereby give my/our approval to his/her participation in any and all of the activities of the program. I/We assume all risks and hazards incidental to the conduct of the activities. I/We do further hereby indemnify, hold harmless, and forever release the City of Franklin, its mayor and aldermen, representatives, agents, servants and employees, from and against any and all claims or actions of any and all persons for judgments, losses, expenses, death, bodily injury, or damage to property which arises from or is a result of his/her participation in the Activity, negligent act, error or omission whether such claims are based in whole or in part upon the negligence of the Participant or the City of Franklin for any defect in equipment, any site condition, or any negligence by any person, including other participants.

________________________________________________ Date: ______________________
Signature (registration incomplete without signature)

Please submit completed registration and signed form to:
City of Franklin c/o Programming
Parks Department - P.O. Box 305 - Franklin, TN 37065
Email: robert.thomas@frankltn.gov, Phone: 615 794-2103, Fax: 615 791-3250

OFFICE USE ONLY:

Received by: ______________________ Date: ______________________