

Registration Policy

Registration Begins: January 4, 2016

Mail In

- 516 Front St., Vestal, NY 13850
- Complete registration form below and mail to address above.
- Checks payable to: "Town of Vestal"

Drop off

- 516 Front St., Vestal, NY
- There is a mail slot in door that you can drop off registration 24/7
- Drop-off does not guarantee enrollment, you will receive a receipt via email or USPS as confirmation.

Web - You can view our brochure online and download a registration form and mail it in or drop it off. At this time our Department does not accept credit cards. Cash, Check, or Money Order can be mailed or dropped off.

- www.vestalny.com - look on top right hand, pull down box, choose Recreation, and then registration form.

Registration Deadline: We accept registrations until an activity is full. If we do not get enough to run the program, then we will cancel and refund you. If you are registering for an activity where you get a t-shirt, note we must order them 3 weeks before program starts.

Wait list: If a class is full and there is an alternate choice we will call you.

Fees: All fees must be paid in full and are due at the time of registration. Partial payments are not accepted. All checks and money orders are made out to: Town of Vestal. Refund requests must be made no less than one week prior to the start of the activity. Returned checks will be charged \$20 service charge. You must bring in the amount due plus the service charge in cash only.

Non-Resident fee: A fee of \$10 is included in the non-resident fee. If you do not live in the Town of Vestal, you are considered a Non-Resident. If your children go to Vestal Schools but you live in Apalachin, you are considered a non-resident of the Town of Vestal. Town taxes and school taxes are completely separate.

All participants and their legal guardians assume all risk of any injuries arising out of or connected with these programs. The Town of Vestal shall not be liable for any damages whatsoever.

Registration Questions?
Call us at 754 3368
 or email michellet@vestalny.com

Town of Vestal Recreation Dept., 516 Front St., Vestal, N.Y. 13850

Parent/Guardian (FIRST) _____ (LAST) _____

Address _____ City _____ State _____ Zip Code _____

Home phone (____) _____ Cell phone: (____) _____

E Mail Address

Receipt e-mailed or leave e-mail blank if you want receipt mailed. Please print.

Secondary Parent/Guardian (FIRST) _____ (LAST) _____

Cell phone (____) _____ Emergency Contact and Phone# _____

T Shirt Sizes
Youth
YS – Small (6-8)
YM – Med. (10-12)
YL – Large (14 – 16)
Adult
AS – Small (34-36)
AM – Medium (38-40)
AL – Large (42-44)
AXL – X-Large (46)

List the full names and ages of the girls going to the Father Daughter Ball and the dads' full name.

Participant Name	First	Last	Sex	Date of Birth	Grade	Activity Number	Activity Name	T shirt Size	Fees

2016 Father Daughter Ball – Please fill out the information below:

Total _____

Table Requests:

All fathers will sit with their daughters. Please list all individuals' names that you wish to be seated with or near. If you do not have a preference; we will seat you with other families. **The ONLY way to guarantee sitting together, ALL 8 people must register and pay all together.** Everyone must put the same family names down under requests. Eight maximum per table.

Registration for the Ball ends Friday, February 5 at 4:30 PM, unless it fills prior to that date.

T Ball or KNO Team Requests:

Date Received: _____ Date Processed: _____ **Make Checks payable to: Town of Vestal**