

Moline Park and Recreation Department

3635 4th Avenue, Moline, IL 61265 · Phone: 797-0785

Program Registration

Step 1: Your Information (Adult responsible for registration and payment)

Name: _____ Birthdate ____/____/____ Male Female

Address: _____ City, State, Zip: _____

Home Phone: _____ Business Phone: _____ Email: _____

Step 2: Your Household Information *(If you have registered with us before, you may skip to section 3.)*

	Person 1	Person 2	Person 3	Person 4
Name				
Birthdate				
Male / Female				
School / Grade				

Step 3: Your Class Selections

Class ID #	Program Title	Participant's Name	Skill Level (if applicable)	T-Shirt Size (if applicable)	Fee

Step 4: Payment / Waiver and Release

For Credit Card Use: *Visa* *MasterCard*
 Discover *American Express*

Credit Card #: _____ Exp. Date _____

CID # (3 digit # from Signature Panel on back of card): _____

Cardholder Name: _____

Signature: _____

Please Sign. . .

The City of Moline, The Park and Recreation Board, and School District #40 are not liable for accidents or incidents that result in injury or any other damage.

Signature of Parent or Guardian

For Office Use Only: Date Rec'd: _____

Amount: _____ Receipt No. _____



Thank you for participating in our programs. Please retain this portion for your records:

Program Name: _____ Days: _____

Start Date: _____ End Date: _____ Class Time: _____