



2024 Summer Recreation Registration

Monday – Friday • June 17 – July 18 • Wilson Park

Borough of Green Tree

10 W. Manilla Avenue, Pittsburgh, PA 15220
412.921.1110 | www.greentreeboro.com

Make check payable to **Green Tree Borough**
ALL FEES ARE NON-REFUNDABLE

Summer Recreation Rates

Resident	\$40
Resident Family Maximum	\$55
Non-Resident	\$80
Guest per Day	\$7

FOR OFFICIAL USE ONLY

<input type="checkbox"/>	Resident	<input type="checkbox"/>	Non-Resident
<input type="checkbox"/>	Cash		
<input type="checkbox"/>	Check No.		
<input type="checkbox"/>	CC Receipt No.		
Total Due			

Family Name _____ Contact No. _____
Last Name

Address _____ Email _____

Emergency Contact

Name _____ Contact No. _____

Participants First Name	Age	Grade (Fall 2024)	Allergies		If yes, Explain
			Yes	No	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

Please select your child(ren)'s T-shirt size(s):

<input type="checkbox"/> Youth Small	<input type="checkbox"/> Youth Medium	<input type="checkbox"/> Youth Large	<input type="checkbox"/> Youth XL
<input type="checkbox"/> Adult Small	<input type="checkbox"/> Adult Medium	<input type="checkbox"/> Adult Large	<input type="checkbox"/> Adult XL

Borough of Green Tree Statement of Understanding and Release for the Summer Recreation Program

I, the undersigned, as parent/guardian of _____ hereby enroll our minor child(ren) in the Summer Recreation Program (Program) for the Borough of Green Tree. In so enrolling our child(ren), I recognize and agree that:

1. Participation in Program and recreational activities can result in serious injury and disabilities to our child(ren);
2. As the parent/guardian of said child(ren), I am responsible for all medical expenses and/or injuries sustained by our child(ren) while participating in the program;
3. Health insurance coverage for any child(ren) participating in the Program is not provided by the Borough of Green Tree. Responsibility for providing medical insurance, if any, is that of the parent/guardian;
4. In consideration of the Borough agreeing to accept our child(ren) in the program, we hereby release and hold harmless the Borough of Green Tree, it's officers and employees from any and all liability for any injury, liability or claim that might arise by reason of our child(ren)'s participation in the Program;
5. Photos and/or videos may be taken of my child(ren) and published in local publications and/or web media.

Applicant Signature _____

Date _____