

# Seneca River Day Paddle Fest

## 1st Annual

## June 9, 2018

To Register Call  
315-635-5999

10 am Check-In  
\$30 per Person



DAY: **Saturday**  
DATES: June 9, 2018  
CHECK-IN: 10:00 AM at Community Park (1 Lions Parkway)  
FEE: \$30.00 (Includes \*event t-shirt, food voucher & 1 duck ticket)  
NEED A KAYAK OR CANOE: \$35.00 Single or \$50.00 Tandem – Provided by Erie Canal Boat Company (Limited # available / must be returned by 5:00 pm)

Send Registration to:  
*Lysander Parks & Recreation Dept.  
8220 Loop Rd,  
Baldwinsville NY 13027*

Check's Payable to:  
*Town of Lysander*  
  
\*T-Shirt Deadline:  
*May 18, 2018*

Proud Sponsors:  
*Erie Canal Boat Company  
Rotary Club of Baldwinsville  
Town of Lysander  
Village of Baldwinsville*

(Cut across the Line) **~ All Participants Must Wear A Life Jacket ~**  
PADDLE FEST REGISTRATION FORM

NAME: \_\_\_\_\_ M/F: \_\_\_\_\_

BIRTHDATE (under 18 yrs. old): \_\_\_\_\_ AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE (C): \_\_\_\_\_ (H): \_\_\_\_\_

Email address: \_\_\_\_\_

Program: Paddle Fest Fee: \_\_\_\_\_

**\*T-shirt Deadline 5/18/18**

**Circle T-shirts Size:** SM MD LG XL (XXL XXL \*Add \$3)

Refunds: Full refunds are given if we cancel the class. Refund - minus a \$15.00 administrative fee will be given for checks, cash & credit card payments until the day after 1<sup>st</sup> class. No refunds for "one time" classes. Photos taken for publicity purposes may be used on the Town Web Site, on our facebook pages, in local newspapers or in our brochures, unless otherwise noted by a parent. As the participant, parent or legal guardian of the above named participant I accept full responsibility for any and all injuries which may arise out of participation in the program(s) being registered for and hereby release the Town of Lysander, its agents and/or employees from any claims of any nature whatsoever arising out of my/my child(ren)'s participation. Consent is hereby granted to allow myself/my child(ren) to participate in the program(s) listed above. There is no medical insurance for any programs. I have read, understand, and agree to the policies listed on this page.

### CREDIT CARD INFORMATION ....

- **I understand there will be a 2.45% fee with a minimum service charge of \$3.00 for using a credit card**

MUST BE FILLED OUT IN ORDER TO PROCESS:

MC ☐ DISCOVER ☐ VISA ☐ AMERICAN EXPRESS ☐

EXP. DATE: \_\_\_\_\_

CARD NUMBER: \_\_\_\_\_

CARD HOLDER'S NAME \_\_\_\_\_

----- OFFICE USE ONLY -----

DATE: \_\_\_\_\_ DOD: \_\_\_\_\_

CHECK: \_\_\_\_\_ CASH: \_\_\_\_\_ AMT: \$ \_\_\_\_\_

CHARGE: \_\_\_\_\_

AUTH#: \_\_\_\_\_ REF#: \_\_\_\_\_

 Signature