

**THURSDAY, AUGUST 1, 2019**

**7PM SHOW**

**IMPERIAL THEATRE**

**\$150 PER PERSON**

**INCLUDES ORCHESTRA-SEAT TICKET  
ROUNDRIP COACH BUS TRANSPORTATION**

**BUS LEAVES LINCOLN PARK @ 4PM & LEAVES NYC AFTER THE SHOW**



**PLEASE COMPLETE THE FORM BELOW AND RETURN TO:**

**LINCOLN PARK RECREATION DEPT / 34 CHAPEL HILL ROAD / LINCOLN PARK, NJ 07035**

**CASH OR CHECK ONLY (PAYABLE TO BOROUGH OF LINCOLN PARK)**

**NAME:** \_\_\_\_\_

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

**PHONE:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**# OF TICKETS:** \_\_\_\_\_ **AMOUNT PAID:** \_\_\_\_\_

**Waiver & Consent:** I acknowledge that I am or my child is in suitable physical condition to participate in the recreation program, activity, sport, trip or event that I have registered for or have registered my child for & I hereby assume any risks involved by such participation. I certify that I am or my child is fully capable of participating in this recreational program, activity, sport, trip or event & that I do not have or my child does not have any physical or mental disability that would restrict full participation. For me & on behalf of my child, I do hereby waive, release, indemnify & hold harmless the Borough of Lincoln Park, its directors, superintendents, employees & volunteers from any liability &/or for any injury or damages that may be suffered by me or my child in the course of participation in the recreation program, activity, sport, trip or event & the activities incidental thereto, whether the result of any negligence or any other cause. In the event I am unable or unavailable to do so, I grant permission to receive or have my child receive emergency professional medical care as deemed necessary by the Recreation Staff. I agree to abide by the Rules & Regulations of the Lincoln Park Recreation Department & those of the venue that the Lincoln Park Recreation Department is visiting.

**Photo Waiver Acknowledgement:** Lincoln Park Recreation reserves the right to photograph attendees throughout the course of their events. As an attendee &/or on behalf of my child, I hereby grant permission to the Borough of Lincoln Park, its directors, superintendents, employees & volunteers to photograph me &/or my child & use the images solely for public relations purposes &/or the social media pages of the Borough of Lincoln Park. I do hereby waive, release, indemnify & hold harmless the Borough of Lincoln Park, its directors, superintendents, employees & volunteers from any liability &/or for any injury or damages that may be suffered by me or my child as a result of the taking or use of the photograph & images obtained in the course of participation in the recreation program, activity, sport, trip or event & the activities incidental thereto, whether the result of any negligence or any other cause.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE CONTACT : JANET CASSIDY**

**973-694-6100 EXT #2044 OR JCASSIDY@BOLP.ORG**

**NO REFUNDS**