Online registration: Go to **vestalrecreation.com** and **Login or Create New Account** with your household information. A non-refundable convenience fee will be applied to all credit card transactions and electronic checks. Be sure to add all the members of your household into the account. If you wish to receive texts for cancellations and program updates, please add your cell phone number. **Other registrations options:**

- Mail In: Complete registration form below and mail with fee to Vestal Rec., 516 Front St., Vestal, NY 13850.
- **Drop off:** 516 Front St., Vestal, in mail slot on the door 24/7. Drop-off does not guarantee immediate enrollment, you will receive a receipt via email or mail as confirmation. You can also pay in person during business hours. Use form below. We will notify you if a program is full.

Registration Deadline: We accept registrations until an activity is full. If we do not get enough participants to run the program, we will cancel and refund you. If registering for an activity that includes a t-shirt, you must register three weeks before program starts to guarantee correct size.

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 emailed to Kelcy at kwickman@vestalny.gov and **made no less than one week prior to the start of the activity**. Program fees will be refunded by the same way you paid, and may take up to two weeks. Returned checks will be charged \$20 service charge. You must bring in amount due plus the service charge in cash only. Credit card and electronic check convenience fees are non-refundable.

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.

Parent/Guardian (FIRST)				(LAST)			
Must be 18 years or older to r							
Address			City		State Zip	Code	
Cell phone ()						-	irt Sizes
Home phone ()						YS –	′outh Small (6-8) edium (10-12)
E: Mail Address Receipt e-mailed or leave e-mail	blank	if you want	receipt m	ailed. Please pri	nt.	AS – S	arge (14-16) Adult Small (34-36)
Secondary Parent/Guardian (FI	RST)_			(LAST)		AL – I	edium (38-40) _arge (42-44)
Cell phone()Emergency Contact and Phone#						AXL – X-Large (46) AXXL— XX-Large (48)	
Participant Name First - Last	Sex	Date of Birth	Grade	Program Code	Activity Name	T-shirt Size	Fees
Father Daughter Ball: List the full Table Requests:	names	of those att	ending.		1	Total	

All fathers will sit with their daughters. Please list all individuals' names that you wish to be seated with or near. We will seat you if no preference. Ten maximum per table. **Deadline for the Ball is Friday, February 7th, 2025 at 4:30 PM,** unless it fills earlier.

T-Ball Team Requests: