

## CHRISTMAS IN THE CITY BUS TRIP 12/13/25 REGISTRATION FORM



Participant Name:(s)						
Address:						
City:	S	tate:	Zip:	·····		
Phone: Cell:	<del> </del>		Home:			
Email:	<del></del>	Stillwater To	wnship Resi	dent:YES _	NO Bus	
Trip Name: <b>Christmas</b>	in the City	Date: <b>Decembe</b>	<u>r 13, 2025</u>	Time: <u>10:00a</u>	m Sharp	
Number of passengers:		-				
Fee: <b>\$35.00</b> per pers	on	Total Amt. P	aid \$			
Reservations may only Sometimes bus trips may notification if this occurs Anyone under the age of Every participant must time. The bus will leaven The UNDERSIGNED Pastillwater, through the Felshe as registered do I/WE Agree to indemnif	ay be cancelled and receive a of 18 must be trope at the Drope exactly at so articipant's Water ARTICIPANT(Secreation Compes hereby:	due to the disc REFUND. How aveling with a p off/ Pick up area heduled depar liver & Release ) and/or he/her mission, providi	retion of the ever, if you arent/guardia 20 minutes ture time. Ne Hold Harm guardian, in ng bus trips	cancel there as an. as before departed by Exceptions alless Agreement consideration of and supervision	are NO REFUNDS.  ure  ent:  of the Township of  on in the activity for whice	ch
liability for personal inju	ry or property of	amage resulting	g from my pa	articipation in s	aid bus trip.	
Signature	<del></del>		Dat	e		
MAKE CHECKS PAYA	BLE TO: Stillwa	ater Township				
MAIL/DROP OFF TO:	Stillwater Town C/O Recreation 964 Stillwater Newton, NJ 07	n Commission Road				
>>>>>>> OFFICE USE ONLY	>>>>>>	>>>>>>	·>>>>>	·>>>>>>	>>>>>	
Check #	Recieved	l by:		Date		
Cash \$						

Bus will be leaving from: Stillwater Town Hall 964 Stillwater Road at 10 am