



BREAKFAST WITH SANTA REGISTRATION FORM

Campobello Fire Department
50 Broad Street, Campobello, SC 29322

This waiver must be filled out before you are able to participate in the Breakfast with Santa event. If additional forms are needed, please duplicate. *PLEASE PRINT*

Contact Name: _____

Address: _____

Phone: _____ Email: _____

DECEMBER 2, 2023

Breakfast with Santa 9:00 a.m. Cost: \$7 per person

of adults: _____ # of children: _____ Amount paid: _____

If any adults/children have allergies, please list them: _____

This registration form must be completed and turned into to Town Hall at 208. N. Main Street, Campobello, SC or by email at khyder@townofcampobello.com. By completing and signing this registration form, you assume all liabilities and injury that may result because of my participation in this recreational function. You hereby knowingly and voluntarily release the Campobello Fire Department, Town of Campobello, Campobello Police Department and all of its agents, employees and officers from and against any and all claims, losses, damage, liability or expense occurring to any of your property or for personal injury or death which may result from your participation in the recreational program.

Signature: _____ Date: _____

I, as the parent/guardian, acknowledge that I am the parent or legal guardian of the registrant and that I have legal authority to bind my child to the terms of this release and waiver.

Parent/Guardian Name: (print) _____

Parent/Guardian Signature: _____ Date: _____



How to pay:

Mail: Town of Campobello/Breakfast with Santa, P.O. Box 9, Campobello, SC 29322
(checks made payable to *Town of Campobello*).

Payment by Phone: (864) 468-4545 (*a 5% transaction fee is added to all card transactions*)

Pay in Person: Town Hall, 208 N. Main St. Campobello, SC 29322 (*between the hours of 8a - 4p*)