



# 22nd ANNUAL EASTER EGG HUNT

Saturday, April 4th, 2026 Spec

## Pond Recreation Complex

The Wilbraham Parks & Rec Dept. is hosting our 22nd annual Egg Hunt at the Spec Pond Recreation Complex! Lots of fun as children hunt for plastic candy/toy filled eggs. Bring your camera and take a picture with the Easter bunny!

**Registration:** March 3 – March 30 (or until space fills)

**REGISTER ONLINE AT: [WILBRAHAMREC.COM](http://WILBRAHAMREC.COM)**

**OR Via Mail: Wilbraham Parks & Recreation**

**45C Post Office Park**

**Wilbraham, MA 01095**

**Who:** Ages 10 and under (Adult supervision required)

**When:** 10:00 a.m. - activities will start promptly!

**Cost:** \$5 per child (must pre-register)

**REGISTRATIONS WILL NOT BE ACCEPTED AT THE HUNT**

**WILL BE HELD RAIN OR SHINE...COME DRESSED APPROPRIATELY!**



### 2026 EGG HUNT REGISTRATION FORM—One Per Child Please

NAME: \_\_\_\_\_ D.O.B. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ AGE: \_\_\_\_\_ GR: \_\_\_\_\_ MALE / FEMALE

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_  
city/state/zip

PARENTS NAMES: \_\_\_\_\_ E-mail: \_\_\_\_\_

• **NOTE:** Parents are responsible for overseeing any allergies or restrictions in children participating (nut products utilized)

• **A PARENT OR ADULT IS REQUIRED TO STAY WITH CHILD DURING THIS ACTIVITY**

**WAIVER:** I, the undersigned parent and/or guardian of \_\_\_\_\_, a minor, on the date of \_\_\_\_\_, do hereby consent to my child's participation in voluntary recreational programs of the Town of Wilbraham.

I agree not to sue and also agree to forever release the Town of Wilbraham, and the H.W. School District their servants, officers, officials, employees, agents and ("the releasees") assisting or participating in voluntary recreational programs of the Town of Wilbraham from any and all claims, rights of action and causes of action that may arise in the past, or may arise in the future, directly or indirectly, from personal injuries to my child or property damage resulting from my child's participation in the Town of Wilbraham voluntary recreational programs.

I also promise, to indemnify, defend, and hold harmless the releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to my child or property damage resulting from my child's participation in the Town of Wilbraham voluntary recreational programs.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this form. I understand that my child's participation in these programs is voluntary and that my child and I are free to choose not to participate in said programs. By signing this form, I affirm that I have decided to allow my child to participate in the Town of Wilbraham's athletic recreational programs with full knowledge that the releasees will not be liable to anyone for personal injuries and property damage my child or I may suffer in voluntary Town of Wilbraham recreational programs.

\* **REFUND POLICY:** Because the decision to maintain this program is based on the enrollment, no refunds will be given.

\* **RELEASE:** For promotional purposes, photos may be taken of my child and put on the WPRD website or in printed material. I understand it is my responsibility to notify the WPRD in advance in writing as well as the photographer if my child is **not** to be photographed.

**I have read, understand and agree to all of the above information:**

\_\_\_\_\_  
parent/guardian signature required

DATE: \_\_\_\_\_ TOTAL PAID: \_\_\_\_\_ CHECK # \_\_\_\_\_ CREDIT CARD \_\_\_\_\_

## WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

### ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate in Town of Wilbraham Parks & Recreation Department programs and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,

I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,

I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,

In addition to general risks of participation, the novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. Town of Wilbraham Parks & Recreation Department seeks to limit the spread of COVID-19 by requiring that participants stay home if they: 1) are sick, 2) are feeling any symptoms of COVID-19 as identified by the CDC (such as cough, shortness of breath or difficulty breathing, fever, chills, or new loss of taste or smell), 3) have a fever of 100°F or above, 4) are suspected of having COVID-19 or 5) had recent exposure to someone with a suspected or confirmed case of COVID-19. By signing below, I acknowledge that I will abide with these requirements to self-monitor and will take my temperature and my child(ren)'s temperature prior to participation. On behalf of myself and my family - we agree to adhere to all state, local, and other guidelines in place designed to keep people safe. I understand that Town of Wilbraham Parks & Recreation Department is not monitoring whether I or other participants comply with this requirement.

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the Town of Wilbraham, Town of Wilbraham Parks & Recreation Department, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

Name of participant: \_\_\_\_\_

Participant signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

### FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Name of parent/guardian: \_\_\_\_\_

Parent guardian/signature: \_\_\_\_\_ Date signed: \_\_\_\_\_