

HALF DAY HOORAY!

for kids in grades K-5

Open to kids currently enrolled at CES or JJIS

Brought to you by: Colchester Recreation, Youth Services & Cragin Library

February 15, 2019, 12:55 pm — 4:15 pm, \$20 per child

Grades K-2 will be held At CES

Grades 3-5 will be held at JJIS

(children must be picked up by 4:30 pm)

Return forms and fees *(checks payable to Town of Colchester)* **to: Colchester Youth Services, Cragin Library, Colchester Rec, or the School Office by February 8th.**

Registrations will be accepted on a first come, first served basis to the first 60 kids at each location.

For forms and more info go to www.colchesterct.gov

Participant's Name: _____ Street Address: _____

Grade: _____ Teacher: _____ Birth Date: _____ Age: _____

Parent's Name (1): _____

Daytime Phone: _____

Cell Phone: _____

Email: _____

Parent's Name (2): _____

Best # to call: _____

Emergency Contact (MUST BE OTHER THAN PARENTS):

Name: _____

Best # to Call: _____

Child Pick-Up Authorization:

**If a parent may not pick up the child, legal proof is required.*

In addition to parents listed and the emergency contact, I give permission for my child to be released to:

Name: _____

Best # to Call: _____

Please list any medical/behavioral conditions & current medications *(whether or not they need to take them during program)*

Examples: ADHD, Allergies, Autism Spectrum Disorder, Dietary Restrictions, etc.

Medical condition: _____

Medication: _____

Medical condition: _____

Medication: _____

Does participant need an accommodation due to a disability to enjoy this activity? Yes _____ No _____

In consideration for the opportunity to participate, I hereby agree to release, discharge and hold harmless the Town of Colchester, its employees and volunteers from the liabilities which may occur from participating. If I can not be reached at the phone numbers provided, I give permission for my child to be treated by qualified medical personnel. In addition, I give permission for the school to share information regarding my child to promote safety and well-being for all participants. I also permit the taking of video or photographs of my child during activities for publication and use by the Town of Colchester for promotional purposes.

Parent/Guardian Signature _____ Date _____