

PLAYGROUP NEWS & REGISTRATION

Playgroup, which runs from 9:30 to 12:00pm daily, will begin on **Monday, June 25th** and end on **Friday, August 3rd**. Children entering Kindergarten in the fall through those who have just completed sixth grade are eligible to attend Playgroup.

This is the official Registration Form for participation in playgroup. A separate form must be filled out for each child, and additional forms can be copied, or obtained on-line at Radburn.org. Please provide as much contact information as possible in the event that contacting a parent or caretaker is necessary.

Once completed, please drop of at the Radburn office at the Grange to pick up a trip packet. The trip packet is due back by **Monday, June 4th**, in order to confirm buses and ensure adequate staff coverage for all summer programs.

***** PLEASE CUT HERE *****

2018 PLAYGROUP REGISTRATION

CHILD'S Name _____ MALE _____ Female _____

ADDRESS _____ GRADE COMPLETED _____ BIRTHDATE _____

E-MAIL address: _____

PARENT: _____ DAY PHONE _____

Home _____ CELL PHONE _____

PARENT: _____ DAY PHONE: _____

Night time phone: _____ CELL PHONE _____

Emergency Name _____ Phone _____

Emergency Name _____ Phone _____

Doctor _____ Address _____

Phone _____

Medical Conditions/Allergies/Special Needs: _____

My child has my permission to walk home unattended from Playgroup Activities: YES _____ NO _____

My child has permission to walk with counselors to tennis courts & local facilities: YES _____ NO _____

Please sign my child up for the **SUPERVISED CROSSING** from and to the **Stone Bench:** YES _____ NO _____
(Crossing only applies to Southside, or R-park residents)

Playgroup Staff may share my contact information with other Playgroup families: YES _____ NO _____

My Child is on the **SWIM TEAM?** YES _____ NO _____

If your Swim Team child who crosses or usually walks home unattended will need to miss the Swim Team practice after Playgroup, please send us a note/text or call on that day.

MEDICAL AUTHORITY:

In the event that I am unable to be reached by telephone, I, the undersigned parent/guardian of the above-named minor, do hereby grant permission to any physician legally licensed to practice medicine or surgery, and/or to any legally constituted and operated hospital to perform diagnosis, treatment and/or surgery on the aforesaid minor child for any emergency illness or injury as deemed necessary by competent medical opinion.

APPROVAL OF PARENT/GUARDIAN _____ DATE _____

WAIVER OF LIABILITY:

I hereby waive any claims against the Radburn Association, its agents and/or employees arising out of voluntary participation in this activity by my child.

SIGNATURE OF PARENT/GUARDIAN _____ DATE _____