



Franklin Township Youth Council's Environmental Committee Presents:

ROAR!



Get ready to travel around the exotic world through different types of habitats! Explore the freezing tundra and the blazing desert using crafts, games, and fascinating fun!

When: Friday, May 30, 2014 / 5:30-8 p.m.

Where: Franklin Twp. Community/Senior Center, 505 DeMott Lane, Somerset, NJ 08873



\$8 in Advance; \$10 at the Door (Payable to Franklin Township)

OPEN FOR GRADES K-4

4 DIFFERENT HABITATS!



***Return registrations to the Community/Senior Center no later the 29th.**

For more information call (732)873-1991, Opt. 4*

Activity Number	Participant Name		AGE	SEX	BIRTH DATE	GRADE	ACTIVITY NAME	PAYMENT	
	LAST	FIRST						Cash	Check#
PARENT OR GUARDIAN	Last Name				First Name				
	Address								
	City				State		Zip Code		
	Home			Cell		E-mail			
PARENT/GUARDIAN AUTHORIZATION									
My child will be picked up by (Mothers Name) _____					(Fathers Name) _____				
(Other) _____					(Relationship) _____				
Are there any medical concerns/medication, allergies, emotional or learning problems that we should be aware of? <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, what are they? _____									
<ul style="list-style-type: none"> I hereby authorize the Franklin Township Department of Parks and Recreation to act for me according to their best judgment in any emergency requiring medical attention. I have read and agree to abide by the policies & procedures listed on the previous page. I understand that my child is participating in a publicly run program and that photographs taken at the program may be used for display and publicity purposes by the Township. Please check the appropriate box : 									
<input type="checkbox"/> Yes, I will allow my child's picture to be used for display and publicity purposes by the Township of Franklin.									
<input type="checkbox"/> No, I do not permit my child's picture to be used for display and publicity purposes by the Township of Franklin.									
I the undersigned, hereby agree to allow the individual(s) named hereon to participate in the Township of Franklin, Recreation Division activities. I certify that, to the best of my knowledge, the participant(s) named hereon is/are physically fit and able to engage in Recreational activities. My signature acknowledges that I understand and agree to the above conditions.									
_____			_____			Select One: <input type="checkbox"/> Parent <input type="checkbox"/> Guardian			
Name Printed			Signature			Date			