

Invention Convention

Fridays—November 6, 13, & 20

Grades K-2: 4:30—5:30 PM

Grades 3-5: 5:45—6:45 PM

Franklin Twp. Community/Senior Center

\$ 35/Residents

\$ 45/Non-Residents



Introduce your child to the world of ideas, creativity, inventions, and patents. Students will construct a familiar object each week such as a hand mixer, windshield wipers, and a conveyor belt. Each model is motorized for maximum movement and fascination. Students are then encouraged to think of what they could invent, or improvements they could make to an existing object to solve a problem.

Pre-registration is required, and VERY limited on a first come, first serve basis. ONLINE registration is available at www.franklintwpnj.org. You may also complete the registration form and WALK-IN or MAIL-IN your registration form, payment & a copy of the child's end of year report card or proof of grade to:



Franklin Recreation / 505 DeMott Lane / Somerset / NJ / 08873.



For further information call Franklin Recreation at 732-873-1991, Option 4.

Activity Time	Participant Name		AGE	SEX	BIRTH DATE
	LAST	FIRST			
PARENT OR GUARDIAN	Last Name		First Name		
	Home Address			E-mail Address	
	City	State	Zip Code		
	Day	Evening	Cell ()		

Are there any medical concerns/medications, allergies, emotional or learning problems that we should be aware of? Yes No
If yes, please explain:

- 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. Photos are never given to outside entities. Please check the appropriate box :
 Yes, I will No, I will not allow 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.

Parent, Guardian Signature

Name Printed

Date