

# PLAY & LEARN: TINY TIME TRAVELERS

Age: 3 years 11:00AM - 12:00PM

Age: 4-5 years (not in Kindergarten) 12:00 - 1:00PM

SATURDAYS, February 13th - March 19th

COMMUNITY/SENIOR CENTER, 505 DEMOTT LANE, SOMERSET, NJ

\$45.00



Take a trip back to the time of the dinosaurs or blast forward on an adventure through space! Play & Learn is a child-independent program that includes arts & crafts, music, story time, & peer play. This time travel themed program focuses on preparing your child for the upcoming social/educational environment of school.

**PRE-REGISTRATION IS REQUIRED!!** along with a copy of your child's birth certificate.

**REGISTRATION IS NOW OPEN!**

Online, Walk-in & Mail-In registration is first come, first serve. Space is limited.

Our office is located at the Franklin Twp Community/Senior Center, 505 DeMott Lane, Somerset, NJ 08873

Our website is [www.franklintwpnj.org](http://www.franklintwpnj.org) Need More Info: call 732.873.1991, #4

**PLEASE NOTE:** Please include a copy of child's birth certificate. Registration cannot be processed without documentation.

| 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.

Signature \_\_\_\_\_

Name Printed \_\_\_\_\_

Date \_\_\_\_\_

Circle One: Parent, Guardian/Participant