

# MIDLAND PARK RECREATION IS SPONSORING A NEW ME & MY SHADOW PROGRAM 2010

THIS SMALL GROUP PROGRAM DIRECTED BY LORI DENT AND ASSISTED BY ADULT AND TEEN VOLUNTEERS IS ESPECIALLY DESIGNED TO MEET THE UNIQUE NEEDS AND ABILITIES OF A CHILD WITH SPECIAL NEEDS THROUGH NON-COMPETITIVE GAMES & MUSIC, AN ARTS-N-CRAFTS SEGMENT, AND A BOWLING TRIP

**AGE** CHILDREN IN GRADES 2-6

**WHERE:** DEPHILLIPS COMMUNITY CENTER, 50 DAIRY ST.

**WHEN:** SATURDAY MORNINGS 10:00 – 11:00AM 4/10 – 5/1



**FEE:** \$20.00, (\$25.00 MAX PER FAMILY) Registration fee made out to The Borough of Midland Park, Att: Lori Dent, 280 Godwin Ave, Midland Park, NJ

-----REGISTRATION FORM-----

## Me & My Shadow Program 2010

CHILD'S NAME: \_\_\_\_\_ AGE \_\_\_\_\_

SCHOOL \_\_\_\_\_

PARENTS NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

**E-MAIL** \_\_\_\_\_

**ALLERGIES OR MEDICAL CONDITIONS:** \_\_\_\_\_

Also, please use reverse side to list any pertinent information that will help us in assisting your child in our program.

I, as parent or guardian of \_\_\_\_\_ do hereby request the Dept. of Parks and Recreation and the Borough of Midland Park, sponsors of the Me & My Shadow Program, to permit my child to take part in all activities. I accept full responsibility for his/her doing so, thereby relieving the Dept. of Parks and Recreation and the Borough of Midland Park from any possible liability.

\_\_\_\_\_ Date \_\_\_\_\_

Parent Signature