

## Butler Township announces 2010 Summer Park Program

Registration forms for the Summer Youth Park Program are available on our Website: <http://www.butler-township.com> and in the lobby of the Butler Township Municipal Building located at 415 West Butler Drive, Drums. Please return forms to the Municipal Office.

This program is for children ages 5 to 12 and will begin June 14<sup>th</sup> and continues for 8 weeks through August 6<sup>th</sup>. No child under the age of 5 or over the age of 12 will be permitted to participate.

The fee for the program is \$10.00 per week for residents of Butler Township and \$12.00 for non residents. There is also available a per day fee of \$3.00 for those not participating in the full week program.

The program will be held at Freedom Park on West Butler Drive in Drums. Activities begin at 9am and end at noon, Monday through Friday. Activities include organized play, games and crafts. In addition, activities will be scheduled at the Butler Township Community Gardens. Park Program participants will be able to plant and maintain small garden plots. In the case of rain the program will be held in the Butler Township Youth Center located in the parking lot.

In conjunction with this program, the Hazleton Area School District and food vendor, Nutrition Inc., are offering a free lunch program. This federally funded program will provide free lunch to anyone under the age of 18. The cold lunches are distributed between 11 am and 1 pm beginning June 16<sup>th</sup> and ending August 6<sup>th</sup>. The lunch program is at the Freedom Park pavilion. Menus are available there and in the lobby of the Municipal Building.

Steve Hahn, Manager  
Butler Township

**2010 PARK PROGRAM REGISTRATION FORM**  
**June 14<sup>th</sup> through August 6<sup>th</sup>**



Personal Information

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone No. \_\_\_\_\_ Cell No. \_\_\_\_\_  
Birthdate \_\_\_\_\_ Age \_\_\_\_\_  
Allergies \_\_\_\_\_  
Medication \_\_\_\_\_

Emergency Contact Information

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone No. \_\_\_\_\_  
Relationship to Child \_\_\_\_\_

Physician Information

Family Physician \_\_\_\_\_  
Physician's Phone No. \_\_\_\_\_

FEE: \$10 per week or \$3.00 per day for Butler Township Resident  
\$12.00 per week or \$3.00 per day for Non-Resident

**RULES**

1. Pick up children promptly at 12:00 p.m. No exceptions.
2. Please dress in appropriate clothing (shorts, t-shirt, socks and sneakers).
3. Children are expected to the director and aides at all times.
4. **NO REFUNDS** for rainy days. In the event of several days of rain the following week would be pro-rated.

I have read and understand the rules of the Park Program.

Parent's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Please bring a small snack and a drink each day.**

**(complete both sides of this form)**

# **BUTLER TOWNSHIP YOUTH PARK PROGRAM**

## ***PARENTAL PERMISSION TO PARTICIPATE AND RELEASE FROM LIABILITY***

I, \_\_\_\_\_, hereby give permission to my son/daughter,  
\_\_\_\_\_, to participate in the Butler Township Youth Park Program.

In consideration of being allowed to participate in the Program as administered by the Township of Butler, Luzerne County, Pennsylvania, including all related events and activities, I, intending to be legally bound, acknowledge the following:

1. I acknowledge and fully understand that my child will be engaging in various activities, including sports and general recreation that may involve risk of injury, and that there may be other risks not known to us or not reasonably foreseeable at this time.
2. That we assume all of the foregoing risks and accept personal responsibility for any damages following injury, disability or other implications.
3. We hereby release, waive and discharge the Township of Butler, Luzerne County, its administrators, supervisors, agents, servants, workmen and/or employees from demands, losses, or damages on account of injury to person or property, caused or alleged to be caused in whole or part, by negligence or otherwise.

The undersigned has read the above Waiver and Release and understands that substantial rights may be given up by signing the same and, notwithstanding, they sign it voluntarily.

Parent's Signature \_\_\_\_\_

DATE