

# NEWTON PARKS & RECREATION DEPARTMENT

## T-ville Trails Summer Program

### Registration - 2010

Name \_\_\_\_\_ School \_\_\_\_\_ Fall '10 Grade \_\_\_\_\_ DOB \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Parent(s) \_\_\_\_\_ Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_  
 Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Is your child taking any medication that needs to be administered at T-ville Trails?  YES  NO

T SHIRT SIZE: Youth Sm \_\_\_\_\_ Youth Med \_\_\_\_\_ Youth Lg \_\_\_\_\_ Adult Sm \_\_\_\_\_ Adult Med \_\_\_\_\_

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DATES (check weeks you wish to attend)	Hours (circle one)
Week One: July 6 - July 9 _____ (starts on Tuesday)	
Week Two: July 12 - July 16 _____	Standard Day 8:30 - 3:30
Week Three: July 19 - July 23 _____	
Week Four: July 26 - July 30 _____	Extended Day 8:00 - 5:00
Week Five: August 2 - August 6 _____	
Week Six: August 9 - August 13 _____	Extended Till 6 8:00 - 6:00

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**TUITION – Fees listed are per child per week.** Non Residents may register starting March 1, 2010

	<u>Standard Day</u>	<u>Extended Day</u>	<u>Extended Till 6</u>
Residents	\$175.00/week	\$215.00/week	\$235.00/week
Non Residents	\$185.00/week	\$225.00/week	\$245.00/week

**Week 1 is \$35.00 less and will not run on Monday.**

A \$25.00 late fee will be assessed for any registrations, paperwork or payments received after May 15, 2010.

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### TOTALS

**Cost per Week x \_\_\_\_\_ Weeks** \$ \_\_\_\_\_  
 Plus Late Fee if applicable

**Deposit due with Registration (\$50.00 minimum)** \$ \_\_\_\_\_

*A \$50.00 non refundable deposit is due with the registration and will be deducted from the total due.*

**Balance Due by 5/15/10:** \$ \_\_\_\_\_

Please fill out both sides of this form and return it with payment (checks made payable to City of Newton) to:  
 Newton Parks and Recreation \* Attn: Sasha Bordett \* 70 Crescent St \* Newton, MA 02466

### T-ville Trails Credit Card Payment Form

Payment may also be made by Credit Card (Master Card or Visa). Please fill out the information below to pay by credit card.

Last Name	First Name	Home Phone	Work Phone
Street	City	State	Zip Code
Credit Card Number	Expiration Date	Visa _____ Master Card _____	Amount \$ _____

**Newton Parks and Recreation Department T-ville Trails Summer Program  
Medical Release Form - 2010**

I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child\_\_\_\_\_. However, if I cannot be reached, I hereby authorize the T-ville Trails Summer Program to transport my child to the Newton Wellesley Hospital, or \_\_\_\_\_ Hospital via Emergency Vehicle, and to secure for my child the necessary medical treatment. I understand that designated staff members at the T-ville Trails Summer Program are trained in the basics of First Aid and Cardio-Pulmonary Resuscitation, and I authorize them to administer immediate First Aid to my child when appropriate.

\_\_\_\_\_  
*Signature of Parent(s)/Guardian(s)*

\_\_\_\_\_  
*Date*

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**Parental Consent Release From Liability and Indemnity For Participation In The Newton Parks And Recreation Department's T-ville Trails Summer Program**

I/We, the undersigned father and mother, or guardian(s) of \_\_\_\_\_, a minor, do hereby consent to his/her participation in, and field trips with the T-ville Trails Summer Program. I/WE forever RELEASE, acquit, discharge and covenant to hold harmless the City of Newton, a municipal corporation of the Commonwealth of Massachusetts, and its successors, departments, officers, employees, servants and agents, of and from any and all actions, causes of actions, claims, demands, damages, costs, loss of services, expenses and compensation on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damages which I/WE may now or hereafter have as the parent(s) or guardian(s) of said minor, and also all claims or rights of actions or damages which said minor has or hereafter may acquire, either before or after his/her participation in, and field trips with, the T-ville Trails Summer Program. FURTHERMORE, I/WE hereby agree to protect the City of Newton and its successors, departments, officers, employees, servants and agents against any and all claims for damages, compensation or otherwise on the part of said minor growing out of or resulting from injury to said minor in connection with his/her participation in, and field trips with, the said T-ville Trails Summer Program and to INDEMNIFY, reimburse or make good to the City of Newton or its successors, departments, officers, employees, servants and agents any loss or damage or cost, including attorney's fees, the City of Newton or its representatives may have to pay if any litigations arise from said minor's participation in and field trips with, the said T-ville Trails Summer Program.

\_\_\_\_\_  
*Signature of Parent(s)/Guardian(s)*

\_\_\_\_\_  
*Relationship*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Witness*

**THIS FORM MAY NOT BE ALTERED**

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**T-ville Trails Summer Program - PHOTO RELEASE**

I/WE, the parent(s) or guardian(s) of \_\_\_\_\_ do hereby grant permission for pictures to be taken of my child for the purpose of publicity for the T-ville Trails Summer Program. I understand that photo's may be published in local papers, on the website, or in future brochures for the Newton Parks and Recreation Department and the T-ville Trails Summer Program.

\_\_\_\_\_  
*Signature of Parent(s)/Guardian(s)*

\_\_\_\_\_  
*Date*