Please return forms to Activity Center!

Gaithersburg
A CHARACTER COUNTS! CITY

City of Gaithersburg 301-258-6350 www.gaithersburgmd.gov

Magnificent Mondays

FREE

For 1st-5th grade children

This program is sponsored by the City of Gaithersburg Department of Parks, Recreation and Culture. Each program will consist of arts and crafts, indoor games and organized outdoor recreation. A snack is provided.

Time: 3:30-6pm p.m.
Location: Gym at Summit Hall Elementary School
Dates: Mondays, September 19-December 12, 2016
Registration is required to participate and is **LIMITED TO THE FIRST 75** participants
*We will ONLY notify you if your child is waitlisted. Call to confirm registration.

Late fee
$3 for every 10 minutes will be charged

Important Information

We uphold the six pillars of CHARACTER COUNTS!
If Montgomery County Schools (MCPS) are closed due to inclement weather or MCPS Holidays, there will be no program!

If participant fails to attend program more than 3 consecutive weeks without a note or form of communication from the parent, the child may be withdrawn from the program to accommodate students on the waitlist.

*** Return signed form to Activity Center 506 S. Frederick Ave Gaithersburg, MD 20877 ***
Or fax to: 301-948-8364
Questions? *Contact Sydney Stasch at 301-258-6350 ext. 126 or sstasch@gaithersburgmd.gov*

Magnificent Mondays — Activity # 45708

□ Check here if new address/phone since last time registered.
Parent's Last Name_____ Parent's First Name_____
Address _____City/State/Zip_____
Home Phone # _____Cell Phone # _____Work Phone _____
Emergency Contact Name (other than parent) _____Emergency Contact Number _____
Email _____

Participant's Name	Sex M/F	Birthdate M/D/Y	Activity Name	Grade	School
			Magnificent Mondays		Summit Hall
			Magnificent Mondays		Summit Hall

Child(ren) will (must check one): WALK HOME □ BE PICKED UP □

Do any of your children have any allergies, medications, or conditions that may affect participation in the program?
□ Y □ N _____
The City of Gaithersburg is committed to making reasonable accommodations as required by the Americans with Disabilities Act. Please indicate what accommodations are needed: _____

I hereby grant permission for my child to attend the afterschool program sponsored by the City of Gaithersburg. I understand that I am responsible for my child's insurance in case of injury. Furthermore, I understand that although safety precautions will be observed, the City of Gaithersburg, employees and agents will not be responsible for any personal property lost by my child or any injury sustained in the program. I also consent to the City's use of any photographs an/or video tapes made of the program. I allow my child to be transported to and from site on these days in which there are any field trips.

Print Parent/Guardian Name _____

Signature of Parent/Guardian _____

Office Use Only: # 45708
Rec'd:_____ Initials _____
W P M F Resident: Y N
Pr: _____ RW _____