Friday Night Club @ the Academy Building!

Program Runs from 7:00-9:30 p.m. unless otherwise specified Open to Special needs adults ages 16 and older from Glastonbury and Glastonbury Special Olympics participants and their Guests.

¥	January 11	Country Line Dancing 🖻 the Riverfront Community Center (Fee \$10)
		Drop off and Pick up at the Riverfront Community Center (300 Welles Street Glastonbury)
		Join us for a foot stompin' toe tappin' good time with Cowboy Ron Moon
	190	Last day to register for Charlie & the Chocolate Factory @ Bushnell
۷	January 25	January Birthday Celebration/Movie Night (Fee \$10)
	Г П	Join us for pizza, cake and birthday celebration fun as we watch a movie
۷	February 8	February Birthday Celebration/Sweetheart Dance Party (Fee \$10)
	F 1 00	Join us for pizza, cake and birthday celebration fun! Activity Code: 208005-CC
۲	February 22	Charlie & the Chocolate Factory @ Bushnell Off-Site* (Fee \$80)
		This trip has a late pick-up time of 11:00 p.m.
	Manal D	Last day to register for GHS Drama Production Guys & Dolls
۷	March 8	GHS Drama - Guys & Dolls Off-Site* (Fee \$25) Activity Code: 208005-GD
		This trip has an early departure time of 6:30 p.m. and late pick-up time of 10:00 p.m.
۷	March 29	March Birthday Celebration/Nifty Fifty Dance Party (Fee \$10)
		Join us for pizza, cake and birthday celebration fun!
	Appil 17	Last day to register for Bowling @ Silver Lanes Bowling @ Silver Lanes Off-Site* (Fee \$25) Activity Code: 208005-01
۷	April 12	-
	Appil 70	Last day to register for Hartford Yard Goats Appil Righthology Colobration / Spaing Eling Depage Depty (Eq. \$10)
۷	April 26	April Birthday Celebration/Spring Fling Dance Party (Fee \$10)
	May (D	Join us for pizza, cake and birthday celebration fun! Hartford Yard Goats Off-Site* (Fee \$35) Activity Code: 208005-YG
۷	May 1U	
		This trip has an early departure time of 6:30 p.m. and late pick-up time of 10:00 p.m. Last day to register for Sonny's Place
	May 24	Gameshow Night (Fee \$10)
•	1'IUY 4 T	Join us for games, popcorn and snow cones!
•	June 7	Sonny's Place Off-Site* (Fee \$35) Activity Code: 208005-SP
•		This trip has an early departure time of 6:30 p.m. and late pick-up time of 10:30 p.m.
		rina ir ip nua un cor iy ucpor tur c time or u.uu p.m. onu iote pick-up time or iu.uu p.m.

IF YOU ARE ABLE, PLEASE BRING A NON-PERISHABLE ITEM FOR ALL DANCE PARTY DAYS TO DONATE TO THE GLASTONBURY FOOD PANTRY!

Friday Night Club @ the Academy Building! IMPORTANT INFORMATION

ALL off-site trips have registration deadlines. Since it is necessary for us to pre-purchase tickets in advance for many of these trips, we will not be able to accept requests after the deadline.

January 11 Last day to register for Charlie & the Chocolate Factory @ Bushnell February 22 Last day to register for GHS Drama Production of Guys & Dolls March 29 Last day to register for Bowling @ Silver Lanes April 12 Last day to register for Hartford Yard Goats May 10

Last day to register for Sonny's Place

PLEASE HELP US BY TURNING IN PERMISSION SLIPS AND MONEY ON TIME! PLEASE BRING A NON-PERISHABLE ITEM FOR ALL DANCE PARTY DAYS TO DONATE TO THE GLASTONBURY FOOD PANTRY!

Register for Programs ONLINE!

While you can still use the traditional method of registering in-person or by mail, registration for all off-site activities is now also being accepted online (no permission slip required when registering online)! Use the Activity Code listed below to register. Payment is accepted by Mastercard, Visa or Discover.

https://webtrac.glastonbury-ct.gov

to sign up for programs online!

Charlie & the Chocolate Factory Activity Code: 208005-CC Guys & Dolls Activity Code: 208005-GD Bowling @ Silver Lanes Activity Code: 208005-01 Hartford Yard Goats Activity Code: 208005-YG Sonny's Place Activity Code: 208005-SP

GLASTONBURY PARKS AND RECREATION DEPARTMENT FRIDAY NIGHT CLUB INFORMATION/EMERGENCY CONSENT FORM

This form will provide Parks & Recreation staff with the information needed in the event of an emergency. It **MUST** be completed and returned with him/her on their first day of attendance at the program. If you have completed a form previously and none of your information has changed, you do not need to complete a new form.

ANYONE THAT ARRIVES WITHOUT A COMPLETED FORM WILL BE SENT HOME. THEY MAY RETURN WHEN THE FORM IS COMPLETED AND ON FILE.

PARTICIPANT INFORMATION

Participant Name		Date of Birth
Address:		Home Phone
<u>PARENT/GUARDIAN INFORMATION</u> Please provide us the name of the Parent/Guardic in case of a problem and/or emergency.	an and where they may be <u>RE</u>	ACHED during the program hours
1) Mother/Guardian	Home Phone	Cell Phone
Name of Employer	Day Phone ()	E-Mail:
2) Father/Guardian	Home Phone	Cell Phone
Name of Employer	Day Phone ()	E-Mail:

SPECIAL NEEDS

In order to provide better accommodations, please make us aware of any special needs that will require additional assistance from staff:

OTHER INFORMATION

Use this space for any additional information that you feel might be helpful to the staff:

EMERGENCY STATEMENT

If in the opinion of program staff, emergency medical services are required, 911 will be called. Should emergency transportation to a hospital be required, it will be coordinated by Emergency Medical Services (EMS). Parents/Guardians will be notified by the numbers provided under the "Parent/Guardian Information" on the front of this form, as soon as possible. If a participant is transported by ambulance, a staff member will accompany them until a Parent/Guardian arrives at the hospital.

MEDICATION

If the program participant is on any medication or requires medication in the event of an emergency (i.e. food allergy, asthma etc.) <u>YOU</u> must obtain and complete an <u>Authorization For Administration of Medication</u> form prior to the start of the program. Forms are available at Parks & Recreation Office or from our website (<u>www.glastonbury-ct.gov</u>) (Click parks & recreation website, downloadable forms, medication(

No

Is medication during the program?	Yes	
-----------------------------------	-----	--

MEDICAL INFORMATION

This information is needed in the event of an emergency.

Medical History:

Known Allergies:

All Medications Currently Taking: _____ (Included Medications taken at home)

EMERGENCY/OTHER CONTACTS

Please provide us the name of the person(s) you want us to contact in the event the Parent/Guardian cannot be reached. Every effort will be made to contact Parent/Guardians first but if you cannot be reached the following will be contacted. Be sure to provide phone numbers where these people may be **REACHED** during the day.

1) Name:	Home Phone	Cell Phone

Relationship to Participant_____

Day Phone ()_____

In an emergency, I give permission for the above person to assume temporary care and to provide transportation for my child if we, the Parent/Guardian(s) cannot be notified.

2) Name:	Home Phone	Cell Phone	
Relationship to Participant	Day Phone ()		
In an omorgonov, Laivo parmission for the above pa	ison to assume temperary car	and to provide transpo	rtation

In an emergency, I	l give permission for t	the above persor	n to assu <u>me</u>	e temporary	r <u>ca</u> re and to	o provide t	ransportation
for my child if we, t	he Parent/Guardian	(s) cannot be no	tified. 🔲	Yes	No		

Name:	Relationship:
Signature:	Date:

Friday Night Club Off-Site Charlie & the Chocolate Factory on Friday, February 22, 2019

Departure: 7:00 p.m. (We will take a school bus from Academy to the Bushnell in Hartford				
Arrival:	7:30 p.m. (Approximate)			
Departure Time:	10:30 p.m. (A school bus will bring the group bac	ck to the Academy Teen Center)		
Return Time:	11:00 p.m. (Approximate)			
Fee:	\$80 (includes Teen Center admission fee, transp ticket to the 8:00 p.m. Show) Pre-Register by I or in-person. If registering on-line, a permis	Friday, 1/11/19 online, my mail		
Off	Site Charlie & the Chocolate	Factory		
Name of Participant	Address	Telephone		
Emergency Contact		Telephone		
Please describe any spec information will be kept c	ial needs and/or medical concerns that we should l onfidential).	be made aware of (all		
2019. Being of full age an release and forever disch representatives, success damages, expenses and a participation in this progr		i this program, I do hereby l employees, their ny and all personal injuries, nay result from my child's		
Parent/Guardian Signatu	Parent/Guardian Signature (If over 18, participant can sign) Date			

Friday Night Club Off-Site GHS Drama Production of the Guys & Dolls Friday, March 8, 2019

Departure:	6:30 p.m. (We will take a school bus from Academy to GHS in Glastonbury)		
Arrival:	rrival: 6:45 p.m. (Approximate)		
Departure Time:	9:45 p.m. (A school bus will bring the group	back to the Academy Teen Center)	
Return Time:	10:00 p.m. (Approximate)		
Fee:	\$25 (includes Teen Center admission fee, transportation and tickets to the show) Pre-Register by Friday, 2/22/19 online, my mail or in-person. If registering on-line, a permission slip is not required.		
Off Si	te GHS Drama Production	of Guys & Dolls	
Name of Participant	Address	Telephone	
Emergency Contact		Telephone	
Please describe any speci be kept confidential).	al needs and/or medical concerns that we sh	ould be made aware of (all information will	
I have read and understand the details of the <u>Off-Site GHS Drama Production of Guys & Dolls on Friday, March 8,</u> <u>2019.</u> Being of full age and in consideration of my/my child's participation in this program, I do hereby release and forever discharge the Town of Glastonbury and their agents and employees, their representatives, successors, and assignees, from all claims arising out of any and all personal injuries, damages, expenses and any loss or damage whatsoever resulting or which may result from my child's participation in this program.			
Parent/Guardian Signatur	e (lf over 18, participant can sign)	Date	

Friday Night Club Off-Site Bowling @ Silver Lanes Friday, April 12, 2019

Departure:	eparture: 7:00 p.m. (We will take a school bus from Academy to Silver Lanes in East Hartford)			
Arrival:	rival: 7:30 p.m. (Approximate)			
Departure Time:	9:00 p.m. (A school bus will bring the group b	ack to the Academy Teen Center)		
Return Time:	9:30 p.m. (Approximate)			
Fee:	Fee: Fee: rental) Pre-Register by Friday, 3/29/19 online, my mail or in-person. If registering on-line, a permission slip is not required.			
	Off Site Bowling @ Silver L	anes		
Name of Participant	Address	Telephone		
Emergency Contact Telephone				
Please describe any sp information will be kept	ecial needs and/or medical concerns that we shou confidential).	ld be made aware of (all		
I have read and understand the details of the <u>Off-Site Bowling</u> <u>Silver Lanes Friday</u> , <u>April 12</u> , <u>2019</u> . Being of full age and in consideration of my/my child's participation in this program, I do hereby release and forever discharge the Town of Glastonbury and their agents and employees, their representatives, successors, and assignees, from all claims arising out of any and all personal injuries, damages, expenses and any loss or damage whatsoever resulting or which may result from my child's participation in this program.				
Parent/Guardian Signa	Parent/Guardian Signature (If over 18, participant can sign) Date			

C C	Friday Night Cl Off-Site Hartford Yard Goats Friday, M		
Departure:	6:30 p.m. (We will take a school bus from Acad	emy to Hartford Yard Goats Stadium)	
Arrival:	7:00 p.m. (Approximate)		
Departure Time:	9:30 p.m. (A school bus will bring the group ba	ck to the Academy Teen Center)	
Return Time:	10:00 p.m. (Approximate)		
Fee:	\$35 (includes Teen Center admission fee, transportation and tickets to the game) Pre-Register by Friday, 4/12/19 online, my mail or in-person. If registering on-line, a permission slip is not required.		
	Off Site Hartford Yard G	oats	
Name of Participant	Address	Telephone	
Emergency Contact		Telephone	
Please describe any spe be kept confidential).	cial needs and/or medical concerns that we should	be made aware of (all information will	
age and in consideration discharge the Town of G assignees, from all clain	and the details of the <u>Off-Site Hartford Yard Goats o</u> o of my/my child's participation in this program, I do lastonbury and their agents and employees, their re ns arising out of any and all personal injuries, dama which may result from my child's participation in t	o hereby release and forever epresentatives, successors, and ges, expenses and any loss or damage	
 Parent/Guardian Sionat	ure (If over 18, participant can sign)	 Date	

	Friday Night Clu Off-Site Sonny's Place Friday, June		
Departure:	6:30 p.m. (We will take a school bus from Acad	emy to Sonny's Place in Somers, CT)	
Arrival:	7:30 p.m. (Approximate)		
Departure Time:	9:30 p.m. (A school bus will bring the group bac	ck to the Academy Teen Center)	
Return Time:	10:30 p.m. (Approximate)		
Fee:	Fee: \$35 (includes Teen Center admission fee, transportation, batting cages, mini golf, monkey motion, rock wall and go kart) Pre-Register by Friday, 5/10/19 online, i mail or in-person. If registering on-line, a permission slip is not required.		
	Off Site Sonny's Place	2	
Name of Participant	Address	Telephone	
Emergency Contact		Telephone	
Please describe any spe be kept confidential).	cial needs and/or medical concerns that we should	be made aware of (all information will	
in consideration of my/r Town of Glastonbury and claims arising out of any	and the details of the <u>Off-Site Sonny's Place on Fride</u> my child's participation in this program, I do hereby I their agents and employees, their representatives 7 and all personal injuries, damages, expenses and a result from my child's participation in this program.	release and forever discharge the , successors, and assignees, from all my loss or damage whatsoever	
Parent/Guardian Signat	ure (If over 18, participant can sign)	Date	