

TEEN NITE UNDER THE STARS 2010

FRIDAY JULY 2ND

PLACE: CAMP FARNAM (MAIDEN LANE , DURHAM CT. 06422)

TIME: 6:00PM-9:00PM

FEE: \$10:00

Mail to: Durham Recreation
P.O. Box 428
Durham Ct. 06422

ACTIVITIES:

CAMP FIRE, SWIMMING POOL, FOOD, BASKETBALL, MUSIC, GAMES.

STAFF: DURHAM & MIDDLEFIELD RECREATION STAFF

RECREATION COMMITTEE MEMBERS DURHAM & MIDDLEFIELD

PRE-REGISTRATION REQUIRED

860-343-6724

FOR DURHAM AND MIDDLEFIELD RESIDENTS ENTERING GRADES: 8-11

NAME _____ CELL# _____

ADDRESS _____ PHONE# _____

GRADE _____

EMERGENCY CONTACT _____ PHONE# _____

Please list any medical problems concerning your Student, including allergies or medications:

I hereby give permission for the above Student to participate in the Durham Recreation Summer Program. Sponsored by the Durham Recreation Department. I certify that he/she is in good health. I have listed above any allergies, conditions and or medications that the program personnel should be aware. I further authorize the Durham Recreation staff to act for me according to their best judgment in any emergency requiring medical attention in the event that I cannot be located. In case of injury I understand that I am responsible for all financial liabilities.

Parent

Signature _____ Date _____

Student Signature _____