

Safety Town is a Madison Local Schools program. Many area individuals, organizations and groups sponsor this program. Safety Town is <u>NOT</u> mandatory prior to entering Kindergarten, but rather highly encouraged as a great way for children to explore their community through class activities, hands-on experiences and guest speakers while learning important safety precautions.

Registration must be turned in <u>IN PERSON and is on a first come, first served basis</u>. Forms should be turned into Madison Early Childhood Learning Center (1035 Grace Street Mansfield, Ohio 44905) by Friday, May 6, 2022. Safety Town will be held at the same building **Tuesday**, **May 31—Friday**, **June 10**, **2022** and is open to students from any district. There will be two sessions (AM & PM) each day to accommodate more students. Children who are entering Kindergarten in Fall 2022 may register for Safety Town. There will be no cost for the Safety Town program.

| I prefer my child attend: | AM (9:0 | 0-11:30 a. | m.) | Р | M (1:00-3 | :30 p.m.) | | | |
|--|---|--|--|--|---|--|---|---|--|
| Child's Name: | | Kinderg | Kindergarten School: | | | | | | |
| Parent/Guardian: | | | | | Cell Phone: | | | | |
| Address: | | | | | Zip: | | | | |
| Phone # you want your ch | nild to learn: | | | | | | | | |
| Emergency Contact: | | | | | Telephone: | | | | |
| Specify <u>Emergency</u> Med | dication Requ | uired (i.e | ., EpiPe | n): | | | | | |
| T-shirt size (check one): | Youth size: | XS | S | M | L | XL | | | |
| I would like to purch WAIVER AND RELEASE: for injury to the above name that my child will be accomp the Madison Local Schools, participation in the Madison employees, assigns and trans Madison Local Schools may including, but not limited to, claim and fully releases and claims, damages or expenses | As parent or g d child against panied by his/hi its representati Local Schools sferees to copyr use such photo for example, s indemnifies M | uardian of Madison I er Safety T ves and en "Safety T right, use a ographs of such purpos adison Loc | Local Sch Town tead ployees, own" pro nd publis me and/o ses as pui cal Schoo | nools Safet chers and s the right to gram; and sh the same or my child blicity, illu ols, its emp | y Town, it tudent help o take pho I further a e in print a (ren) with stration, a loyees, vo | s instructor pers throug tographs of uthorize M nd/or electr or without dvertising a lunteers, re | , I hereby waive a s, agents and/or repre h all aspects of Safety f me and/or my child (adison Local Schools ronically at their sole t my name and for any and Web content. The | any claims for damage or esentatives. I understand v Town. I hereby grant to (ren) during our , its representatives, discretion. I agree that y lawful purpose, undersigned waives any | |
| Parent/Guardian Signature: | | | | | Date: | | | | |
| | | For : | addition | al informa | tion pleas | se contact: | | | |
| | | (419) 52 | 2-4319 o | or jeckenw OR | iler@mac | lisonrams. | cal Schools net | | |

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