

Summer Playground



Years of Summer Playground 1969-2009



June 29th - July 31st
Monday through Friday
9:00 a.m. to 12:00 p.m.
at the following sites:

Ringing Rocks Elementary School
Lower Pottsgrove Elementary School
West Pottsgrove Elementary School

The Pottsgrove Summer Recreation Program is for children who reside within the Pottsgrove School District and who have completed kindergarten through 8th grade.

Children are provided with supervised inside and outside activities that include games, crafts and sports. There are planned additional trips that include miniature golfing, bowling, swimming, roller-skating and a Reading Phillies baseball game. Younger participants will be traveling to special programs provided by the Pottstown Library on Thursday mornings beginning July 9th. A complete schedule of activities will be available on the first day. The times of the regularly

(OVER)



↑
KEEP
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MAIL IN
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Mail in the card below and the form on the reverse side or come join us to register at any of our locations on

Monday, June 29 at 9:00 AM

(You may register at anytime if you are unable to attend the first day.)

The program registration fee is \$25 per child
for the 1st and 2nd child
\$70 max per family
\$10.00 per day for non-residents



Sponsored by the Pottsgrove Recreation Board

www.pottsgroverec.com

484-300-9637

Please complete one form for each child

Additional forms available on the website: www.pottsgroverec.com

Also, complete the back of this form (over)

POTTSGROVE RECREATION BOARD REGISTRATION AND EMERGENCY INFORMATION CARD

PLEASE PRINT: Township in which you reside _____

Child's Name _____
LAST NAME FIRST NAME

Address _____ Home Tel. _____

Mother's Cell _____ Father's Cell _____

List two neighbors or nearby relatives who will assume temporary care of your child if you cannot be reached.

1. Name _____

Address _____

Home Tel. _____ Cell _____

2. Name _____

Address _____

Home Tel. _____ Cell _____

2009 Summer Playground

Location your child will be attending
Summer Playground
Please check one

<input type="checkbox"/>	Ringling Rocks Elementary
<input type="checkbox"/>	Lower Pottsgrove Elementary
<input type="checkbox"/>	West Pottsgrove Elementary

Child's Name: _____

Last Grade completed in school: _____
(Those completing Kindergarten -8th grade are eligible)

40th Anniversary Shirt included with registration

Please indicate size needed:

Youth _____S _____M _____L
Adult _____S _____M _____L

\$25 Per child or \$70 per family of 3 or more.

Make checks payable to: Pottsgrove Recreation

After 6/29/09: Registrations accepted at the location you
choose to attend.

Date: _____

In case of accident or serious illness, I request that I be contacted. If I cannot be reached, I hereby authorize the Pottsgrove Recreation Association to call the physician indicated below and to follow their instructions. If it is impractical to contact this physician, the P.R.A. may make whatever arrangements seem necessary.

➡ Signature of Parent/guardian _____

List any medical problems/allergies the staff should be aware of:

Physician's Name: _____

Address _____

Telephone _____

scheduled program may change from time to time depending on the nature of our trips and special events. These changes will be outlined on the calendar provided the first day. You may attend summer playground on the days you are available. Morning attendance on the day of a trip is strongly suggested. Drinks will be offered daily at a minimal cost.

Celebrating
40 years
Summer Playground