

# 2020 Summer Park Recreation Information

## Registration:

Registration forms can be picked up at City Hall or on the city's website at [www.hartfordsd.us](http://www.hartfordsd.us).

Registration forms must be turned in to City Hall by May 29th.

Grades are as of the 20/21 school year.

## Program Dates and Times:

June 1<sup>st</sup> – June 5<sup>th</sup>

Grades K-1 from 8:30 am – 9:30 am

Grades 2-3 from 9:30 am – 10:30 am

Grades 4-6 from 10:30 am – 11:30 am

June 8<sup>th</sup> – June 12<sup>th</sup>

Grades K-1 from 8:30 am – 9:30 am

Grades 2-3 from 9:30 am – 10:30 am

Grades 4-6 from 10:30 am – 11:30 am

June 15<sup>th</sup> – June 19<sup>th</sup>

Grades K-1 from 8:30 am – 9:30 am

Grades 2-3 from 9:30 am – 10:30 am

Grades 4-6 from 10:30 am – 11:30 am

June 22<sup>nd</sup> – June 26<sup>th</sup>

Grades K-1 from 8:30 am – 9:30 am

Grades 2-3 from 9:30 am – 10:30 am

Grades 4-6 from 10:30 am – 11:30 am



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## "Party in the Park!"

June 24<sup>th</sup> from 9:00 am – 12:00 pm for Grades K-1 **ONLY** (Grades 2-3 & 4-6 will NOT be meeting)

June 25<sup>th</sup> from 9:00 am – 12:00 pm for Grades 2-3 **ONLY** (Grades K-1 & 4-6 will NOT be meeting)

June 26<sup>th</sup> from 9:00 am – 12:00 pm for Grades 4-6 **ONLY** (Grades K-1 & 2-3 will NOT be meeting)

## Participant Expectations:

To ensure our program is fun and memorable for everyone, we ask the following of our participants:

1. *Be Respectful (i.e. others, materials, supplies and property)*
2. *Be Safe*
3. *HAVE FUN!*

## Weather:

In the event of severe weather, the Park Recreation program will be cancelled. If lightning is present, there will be no program. Also, in the event of severe weather warnings, there will be no program.

*We will, however, remain in session if there is light rain and no lightning.*

## Clothing Considerations:

Summer is all about being wet, wild and messy! Please make sure your child/children are wearing clothing which is appropriate for these situations.

## Contact Information:

Please call the Summer Park Recreation Director, Laura Johnson, at 360-0563 with any questions or concerns.



# Summer Park Recreation Program Registration Form

June 1, 2020 – June 26, 2020

***Please complete ONE registration form per CHILD***

## **PARTICIPANT'S INFORMATION (Please Print)**

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ SY20/21 Grade: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Please list any participant's medical conditions or special needs:

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## **EMERGENCY CONTACT: (Not Listed Above)**

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

I hereby authorize the person bearing this release to authorize medical attention for my child if he/she is injured or becomes ill while participating in the Park Recreation Program in the event I am unable to do so.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Hospital/Clinic Preferred: \_\_\_\_\_

## **WAIVER OF LIABILITY**

I give my child permission to participate in this program and I understand and acknowledge that there are risks of injury involved during participation in recreational activities conducted by the City of Hartford. Therefore, in consideration of the City of Hartford conducting recreational activities and enrolling members of my family to participate in such activities, I do hereby waive, release and forever discharge any and all claims against the City of Hartford and its employees and agents for damages and/or injuries which may arise from my child's participation in this program.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **PHOTO RELEASE**

I give my permission to the City of Hartford Park Recreation Department to take my picture or my child's picture to use on future advertising or on social media for the program. I also hereby consent to the use of my or my child's photograph or cinematic image without compensation.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\*\*\* *Please notify the Park Recreation Staff of any changes or additions immediately.* \*\*\*\*\***