



***Epping Recreation Department***  
**FEBRUARY VACATION WEEK -FULL DAY PROGRAMS**  
**March. 1 – March 4, 2022**  
**7:30am-5:00pm**  
**Held At Watson Academy**

**Registration Fee is \$42 per Day Tuesday & Friday. & \$50 Wednesday & Thursday per child**  
**Please Register at Epping Rec Programs, Town Hall Or Call 679-3006!**

*Please Check Days You Are Registering For:*

- \_\_\_\_\_ **Tuesday, March 1 – Inc. Trip to Movies @ Oneil Cinema Movie TBD**  
\_\_\_\_\_ **Wednesday, March 2 – Inc. Trip to Pats Peak Ski Area for TUBING** \*Note Cost For This Day is \$50pp  
\_\_\_\_\_ **Thursday, March 3 – Inc. Trip to Hilltop Fun Center for Laser Tag** \*Note Cost For This Day is \$50pp  
\_\_\_\_\_ **Friday, March 4 – Inc. Trip to go Sledding at Harvey's Hill in Epping (Weather Permitting)**

***Please pack snow gear for outdoor play time DAILY, Lunch, Drink or Water Bottle and Two Snacks!***  
***Trips Subject To change! (You will be notified if there is a change in scheduled activities!)***

**Total Due:** \_\_\_\_\_ (Tue. & Fri. = \$42 per child per day, Wed. & Thurs = \$50 pp)

Participant Name: \_\_\_\_\_ Age: \_\_\_\_\_

Parent/ Guardian Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address (For Program Notifications): \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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Important medical history we should know about: \_\_\_\_\_

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**PERMISSION FOR PHOTOGRAPHS**

From time to time, the local news and the Recreation Department staff take photos of program participants in various activities which may be published. Please check your preference for the named participant regarding photographs.

\_\_\_ Yes, I give permission for the above named participant to be photographed

\_\_\_ No, I do not give permission for the above named participant to be photographed

**Permission to Participate and Parental Acknowledgement**

**I understand injuries to participants can occur during recreational activities.** I understand that this minor child will be dropped off at designated locations and will need to travel home on his or her own volition without the supervision of the Town of Epping Recreation Department, its representatives, or employees. As parents/guardians, we understand that appropriate arrangements must be made to pick up the child. I understand that **activities** and **transportation** have **inherent foreseeable** and **unforeseeable risks** and **dangers** associated with them. **Risks** and **dangers** may include, but are not limited to: motor vehicle travel, exposure to forces of nature, time of day, remoteness from medical facilities, insufficient cellular phone coverage, encounters with persons not associated with the Town of Epping Recreation Department or the minor child, physical and mental challenges. I acknowledge that this child's participation at the Epping Recreation Department is voluntary.

I have read this form and fully understand that by signing this form I acknowledge and accept such risks.

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

**Make Check Payable To: Town of Epping**  
**(Not an Epping School District Sponsored Event)**