



# Morning Gym

## with MBTS Parks and Rec@Memorial School

Morning Gym is designed to meet the needs of families with busy mornings. The children have the opportunity to play freely in the gym or play organized games with instructors, Karen Manos & Ruth Amigo. This program is for children in grades K-5. The cost is just \$6 per day and will run from **7:15 am – 8:15 am (No early drop offs please).**

**This program runs on the school calendar and is cancelled if there is a weather delay for school.**

If you are interested in participating in this morning activity, please fill out this form.

Once this form has been filled out and returned to Parks and Recreation; through email at [recreation@manchester.ma.us](mailto:recreation@manchester.ma.us), in the office at Town Hall or to the Morning Gym staff you are welcome to send your child any morning without notice. We will charge your Manchester Parks and Recreation account for the dates you used the program. You are expected to pay your balance in full on the 15<sup>th</sup> of every month for the previous months use at [www.mbtsrec.com](http://www.mbtsrec.com).

Child's Name: \_\_\_\_\_ Age \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender \_\_\_\_\_ Grade \_\_\_\_\_

Teacher: \_\_\_\_\_ Class Room: \_\_\_\_\_

Known Allergies: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Parent Name: \_\_\_\_\_ Parent Cell: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Parent Cell: \_\_\_\_\_

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

Alternate Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

**In consideration for my/my child's participation in programs sponsored by the Town of Manchester-by-the-Sea (the "TOWN"), I hereby release and discharge the Town, its employees and agents from any and all claims for personal injury or other damage that I/my child might sustain or that might occur in the future as a result of my/my child's participation in Town of Manchester Parks and Recreation Department Programs, Events, Trips, and Tours. Further, I agree to indemnify the Town, its employees and agents for any loss, damages or cost, including attorney's fees, which the Town may have to pay if any claims arise from said participation in the program.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*This form must be completed and handed in prior to your child starting Morning Gym – Thank You.*