Join us for a morning full of play! Our Funland staff will lead age-appropriate games, crafts, songs, stories, and other activities to foster socialization, imagination, creativity, and learning, and work on important skills such as counting, reading, fine motor skills, and more.

Location: Thomas Jefferson Elementary School, 250 Athens Blvd
Ages: 2-5 years
MUST be potty trained and independent in the bathroom.

Two sessions to choose from:

Mondays, Wednesdays & Fridays, January 6-June 5, 9:30am-12:30pm
No class on 1/20, 2/17, 2/19, 2/21, 4/10, 4/13, 4/15, 4/17, 5/22, 5/25
$955 for residents; $1055 for non-residents for the 56-class session
8 students needed to run this class

Tuesdays & Thursdays, January 7-June 4, 9am-12pm
No class on 2/18, 2/20, 3/20, 4/14, 4/16
$665 for residents; $735 for non-residents for the 39-class session
8 students needed to run this class

You must commit to the entire session (we cannot offer refunds or pro-rated fees based on non-attendance) and attend only on your registered patterned days (ie. Cannot attend Mondays, Wednesdays, and Thursdays)

For more information about our programs at Jefferson:
Visit www.ttypr.com  Email nfields@tonawanda.ny.us
Call 768-3077 or 831-1001  Follow Us facebook.com/kyckidsclub

Kenmore-Tonawanda UFSD neither endorses nor sponsors the organization or activity represented in this material.
The distribution of this material is provided as a community service.
AM FUNLAND
REGISTRATION FORM

Online Registration: www.ttypr.com
Walk-in Registration:
YPR Department, 299 Decatur Road, 831-1001
Aquatic & Fitness Center, One Pool Plaza, 876-7424
Senior Citizen Center, 291 Ensminger Road, 874-3266

Activity # - section 123456-01

Program Days Participant’s First Name Participant’s Last Name Birthdate M/F Circle Fee

116041 - A MWF
M F $955 / $1055

116041 - B TR
M F $665 / $735

ASSUMPTION OF RISK & RELEASE FORM

The undersigned person requests and is granted permission to participate in classes, activities programs and/or events sponsored by the Town of Tonawanda ("Town") whether occurring on its premises or elsewhere. In consideration of participation in any such class, activity, program or event, the undersigned, his/her personal representatives, heirs and/or assigns, DOES HEREBY:

1. RELEASE, DISCHARGE AND COVENANT NOT TO SUE the Town, its Board, Officers, Employees and/or Agents from any and all claims for personal injury or property damage, except those resulting from the Town's negligence, arising out of participation in any such class, activity, program or event, and further agrees to hold harmless the Town from any claims, judgments or expenses the undersigned may incur by participation in the described activity.

2. UNDERSTAND that participation in the described activity involves danger and risk of injury. The inherent danger is understood and voluntarily assumed.

3. ACKNOWLEDGE that the undersigned is aware of equipment and safety regulations and will comply with each regulation ASSUMING ALL RISK for himself/herself and all liability to others for failure to do so. No oral representations or inducements have been made prior to signing this agreement. If any portion of this agreement is held invalid, it is agreed that the balance thereof shall continue in full legal force and effect.

I HAVE READ THIS DOCUMENT AND UNDERSTAND THAT IT IS A RELEASE OF CLAIMS ON THE CONDITIONS SET FORTH ABOVE. I UNDERSTAND AND ASSUME ALL RISKS INHERENT IN THIS ACTIVITY ON BEHALF OF MYSELF OR IN MY CAPACITY AS LEGAL GUARDIAN FOR THE PARTICIPANT BELOW.

I understand that my child must be potty trained and independent in the bathroom to participate in this program. While accidents may happen, chronic accidents may result in removal from the program.

______________________________________________________         __________________________________________________
Authorized Signature                                                                 Date

Office Use Only:

Date:_________ Initials:_________ Facility_________ Res Proof_________

Method of Payment: □ Cash □ Check □ MC □ VISA □ Discover □ Other_________