



# MORNING GYM

**School Year 2019-2020**

Manchester Parks and Recreation Department is pleased to be offering “Morning Gym” for the eighth year now. The program 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 our instructors. The class cost \$6.00 per morning and will run from 7:15 am – 8:15 am. **Morning Gym is only offered on days that the school is offered (No early drop offs please). WE DO NOT OFFER MORNING GYM ON SNOW DAYS OR SNOW DELAYS.**

If you are interested in participating in this morning activity please fill out the following form. Once this form has been filled out and returned you are welcome to send your child any morning without notice. Monthly billing: Every month MPR will send you an email to remind you to go to [www.mbtsrec.com](http://www.mbtsrec.com) to pay your bill. You will have until the 15th of the month to go onto our website and pay your balance in full using your Mastercard, Visa, Discover Card, AMX or by check. Return this form to the Parks and Recreation mailbox in the front of the Memorial School (our mail box is located on the window sill in front of Cindy Dodge’s desk), or mail directly to our office at 10 Central Street MBTS, Ma 01944. Please call the office with any questions 978.526.2019

Child’s Name \_\_\_\_\_ Age \_\_\_\_\_

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

Teacher \_\_\_\_\_ Class Room # \_\_\_\_\_

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

Street Address \_\_\_\_\_ Town \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Parent/Guardian Cell \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Parent/Guardian Cell \_\_\_\_\_

Preferred Email for Monthly Billing:  
\_\_\_\_\_

Alternative 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 prior to your child starting Morning Gym – Thank You**