

YouthShops! Registration 2016

Return to YouthShops! P.O. Box 109, Shawnee OH, 43782 or drop off at Pre-Registration events. You may also bring your signed registration on the Monday of YouthShops during the summer if space permits, but don't delay- registration is on a first come, first serve basis.

Child's Name: _____ Age: _____

Child's Date of Birth _____ Parent/Guardian Name: _____

Address: _____

Family e-mail: _____ Phone #1: _____ Phone # 2: _____

Please indicate which YouthShops! you would like to sign up for by checking the box. You may schedule in Shawnee (morning) and in Corning (afternoon). **To avoid empty seats, please only choose those you are reasonably certain you will attend! Thank You!**

Shawnee YouthShops!

| Week | Date | YouthShop! | Location | Time | (√)1Per Wk |
|------|-----------------------|---------------------------|----------------------|----------------|------------|
| 1 | June 13 – June 17 | Music and Dancing on Main | Tecumseh Commons | 9:00AM-11:30AM | |
| 1 | June 13 – June 17 | Irwin Fun with Fitness | Nicofibers Ball Park | 9:00AM-11:30AM | |
| 2 | June 20 – June 24 | Fantastic Fiction | Tecumseh Commons | 9:00AM-11:30AM | |
| 2 | June 20 – June 24 | Shawnee Community Days | Nicofibers Ball Park | 9:00AM-11:30AM | |
| 3 | June 27 – July 1 | Young Actors Studio | Tecumseh Commons | 9:00AM-11:30AM | |
| 3 | June 27, 29, & July 1 | American Flag | Tecumseh Commons | 9:00AM-11:30AM | |
| 4 | July 5 – July 8 | Making Face Mugs w/Maddy | Tecumseh Commons | 9:00AM-11:30AM | |
| 4 | July 5 – July 8 | Tecumseh Lake Adventures | Nicofibers Park | 9:00AM-11:30AM | |
| 5 | July 11 – July 15 | Paper Making and Printing | Tecumseh Commons | 9:00AM-11:30AM | |
| 5 | July 11 – July 15 | What is Play? | Nicofibers Ball Park | 9:00AM-11:30AM | |
| 6 | July 18 – July 22 | Secrets of Science | Tecumseh Commons | 9:00AM-11:30AM | |
| 7 | July 25 – July 29 | Archery is All the Rage | Tecumseh Commons | 9:00AM-11:30AM | |

(Corning Youth Shops Next Page)

► Photography Permission ◀

Parent, please place initials here if you give permission for your child to be included in photos for publicity purposes.

Corning YouthShops!

| Week | Date | YouthShop! | Location | Time | (√)1Per Wk |
|------|-------------------|-------------------------------------|--------------|--------------|------------|
| 1 | June 13 – June 17 | Archery is All the Rage | Civic Center | 12:30-3:30PM | |
| 1 | Thursday, June 16 | Goosebumps | Altier Park | 8:30PM | |
| 2 | June 20 – 24 | Irwin's Food, Fun and Fitness | Civic Center | 12:30-3:30PM | |
| 3 | June 27 – July 1 | Adventures in the Forest @ Burr Oak | Civic Center | 12:30-3:30PM | |
| 4 | July 5 – July 8 | Burr Oak Bound w/ Rural Action | Civic Center | 12:30-3:30PM | |
| 5 | July 11 – July 15 | What is Play? | Civic Center | 12:30-3:30PM | |
| 6 | July 18 – July 22 | Secrets of Science | Civic Center | 12:30-3:30PM | |
| 7 | July 25- July 29 | Wild World Of Writing | Civic Center | 12:30-3:30PM | |

Medical Information- If my child becomes ill or is injured at YouthShops! Please contact:

Mother: _____ Daytime Phone: _____

Father: _____ Daytime Phone: _____

Other/Guardian: _____ Daytime Phone: _____

I hereby give consent for the following medical care providers & local hospitals to be called in case of emergency:

Hospital: _____ Phone: _____

Physician/Other: _____ Phone: _____

In the event that reasonable attempts to contact me have been made and been unsuccessful, I hereby give my consent for the administration of any treatment deemed necessary by above-named doctors, or, in the event the designated practitioner is not available, by other licensed physician and for the transfer of my child to any hospital that is reasonably accessible.

Parent/Guardian Signature: _____ **Date:** _____

Please list any facts concerning child's medical history, including allergies, medications being taken, diet precautions, or any physical impairment to which a physician or YouthShops! Staff should be aware below. Any other concerns or suggestions regarding your child that will be of help to us should also be listed here. Thank You! (If need use back)

Release of Liability- I, as parent or legal guardian representing a minor participating in the YouthShops! program, agree to release Sunday Creek Associates, it's officers, employees, volunteers and program sites from any and all liability from accidents, injuries, loss and or damage to me, my child or the minor for which I am a guardian, or my property that may arise from our participation or presence at the activities of YouthShops! We are aware there are certain risks of possible dangers in participating in this activity. I have entered into this agreement of my own free will.

Parent/Guardian Signature: _____ **Date:** _____

Thank You!