The Sunshine Group 2020

Director: Jessica Peck (978)790-9779 Assistant Director: Mark SanClemente

Email: <u>thesunshinegrp@gmail.com</u> Website: <u>www.thesunshinegrp.com</u>

Tuition:

Medway Residents: \$500, Out of Town: \$700

Family discount details: www.thesunshinegrp.com/parents-and-children

Program Dates:

Tuesday, July 7 - Friday, August 14 - 9:00 am - 12:00 pm (Our program runs Tuesdays – Fridays)
Oakland Park/Medway Senior Center, 76 Oakland Street, Medway, MA 02053

Sign Up for our Blog!

We post daily updates in order to keep in touch with families and provide updates throughout the summer. Sign up for the blog on our website www.thesunshinegrp.com!

Our blog will provide you with:

- photos and information about daily activities for conversation starters
- field trip information and permission slips
- reminders about upcoming events or any changes to our schedule

The blog is the easiest way for us to communicate information to all parents at once! Please check the blog often and consider signing up for emails that will alert you when a new blog has been posted!

Apply for Summer 2020:

Mail completed applications by May 15th with check made payable to The Sunshine Group to:

Jessica Peck

17 Kittredge Road,

Shirley MA, 01464

Note: Check is due with the registration, but won't be deposited until July 1st

^{*} Save this page for your own records and mail the rest of the application in!

The Sunshine Group 2020 Child Application

Permission to Photograph: I give permission for my child to be photographed while attending the Sunshine Group and for use in the slideshow, memory books and on the website. **Circle your choice:** YES NO

I give permission to have my child photographed by any news media Circle your choice: YES NO

** Please Print Very Clearly **

Child's Name: DOB: Age (by July 1st)_____ Grade they will be entering in the fall: _____ T-Shirt Size (circle one) Youth: S M L Adult: S M L XXL Address: Primary Contact Information: Name: Phone: _____ Email: ____ Additional Contacts: Name: _____ Phone: _____ Email: _____ Name: ______ Phone: _____ Allergies: Fears or Concerns (yours or your child's): **Bus Transportation** is provided by The Sunshine Group for all students living in Medway. There is a monitor on the bus at all times. Will your child be taking the bus? Circle your choice: YES NO

I, the undersigned, as parent/guardian of the above mentioned child, do hereby permit the hospital and its physicians to perform on this child any procedure or treatment as may be deemed necessary in an emergency situation.

In Case of Emergency if we are unable to reach you, may we have permission to send your child to

the nearest hospital for treatment? Circle vour choice: YES NO

Parent Signature: Date: _____

The Sunshine Group 2020 Child Application

TOWN OF MEDWAY RELEASE OF LIABILITY PARTICIPATION IN PARK & RECREATION PROGRAM

In consideration of acceptance of _	as a participant in the Town of
Medway Park and Recreation pro	ogram and in consideration of the risks associated with such use:

- 1. I acknowledge that I have determined the nature and extent of the planned activities and feel that this participant is of sufficient age, ability, and discretion to participate.
- 2. I agree that this participation is at the discretion of the Medway Park and Recreation Department and if the participant becomes a discipline problem, he or she will be expelled from the program without refund of the program fee.
- 3. I hereby grant permission for emergency medical procedures deemed advisable for the participation in the event of injury or illness during participation unless otherwise noted on this form.
- 4. I agree that I will not sue, or otherwise make any claim against the Town of Medway, including its Park and Recreation Department ("the Town"), or its employees, agents, and officials, for any loss, injury or damage resulting from participation in these activities.
- 5. I agree that the Town and its employees, agents, and officials, shall not be legally responsible for any loss, injury or damage resulting from any cause, including negligence of any party.
- 6. I agree that use of equipment which is provided is at the participant's own risk. I understand and agree that the Town shall not be liable for any loss, damage or injury resulting from the use or suitability of said equipment. The Town makes no warranties of any kind regarding this equipment.
- 7. To the fullest extent allowed by law, I agree to RELEASE, DISCHARGE, INDEMNIFY and HOLD HARMLESS the town, its employees, agents and officials from all actions or claims from myself, my heirs or personal representatives for any loss, injury, or damage resulting from these activities, including the use of any equipment.
- 8. The terms of this Release shall also be binding as to any other persons, including family members, heirs, executors, or administrators. I understand that this is a binding contract that supersedes any other agreements or representations and is intended to provide a comprehensive release of liability but is not intended to assert any defenses which are prohibited by law. If any part of this Release is deemed unenforceable, all other parts shall be given full force and effect
- 9. I have read the Release and am legally competent to sign this Release as the parent or legal guardian of the participant.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND THIS AGREEMENT, AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE. I SIGN THIS RELEASE AGREEMENT OF MY OWN FREE WILL.

Date:	Parent/Guardian Signature:	
	Print Name:	
Participant Name (Please pri	nt):	
Date of Birth:	Age:	