

# NORTH KINGSTOWN RECREATION



## Create Easter Crafts with Miss Kelsey, WEDNESDAY March 24th

Ages 5 and under CLASS TIME IS 11:00-11:45 AM Make a mask, Disguise yourself as the Easter Bunny Ages 6 and above CLASS TIME IS 6:00-6:30 What dreams will you catch, Easter Themed Dream Catcher

We will also paint Easter Egg themed stones to hide around Town for our Easter Egg Hunt (see our website for more information)

Class is done over ZOOM. Zoom ID and password will be emailed prior to session. Material Kit pickup will be March 22<sup>nd</sup> and 23rd at 100 Fairway Drive 8:30- 12 and 1-4:30 in the Rec Office please call ahead to get your kit 401-268-1540

There is a one-time fee of \$5 residents and \$5.50 non-residents includes materials and instruction. Children will work within their ability to create their projects. Parental assistance may be required.

In order to provide you the material on time please pre-register by March 21st

To pay by check, please make payable to: <u>TOWN OF NORTH KINGSTOWN</u>. Drop off or mail the form and fee to: <u>Recreation Dept. 100 Fairway Dr, North Kingstown, RI 02852. Or REGISTER ONLINE AT <a href="https://nkrec.recdesk.com/Community">https://nkrec.recdesk.com/Community</a></u>

Questions, please call the Recreation Dept. 268-1540 or email:recreationsecretary@northkingstown.org

See our Photo Op Flyer and Easter Egg Hunt Flyers under Forms and Documents for other Easter Activities

EASTER CRAFTS March 24th		
NAME	PHONE(S)	
WOULD YOU LIKE TEXT NOTIFICATION ABO	OUT PROGRAM? Y N CELLULAR CARRIER	
ADDRESS	028BIRTHDATE	
EMAIL ADDRESS		
SCHOOL	MALE() FEMALE()	
ANY MEDICAL PROBLEMS?		
ANY PROGRAM SUGGESTIONS?		
Please Circle one: Ages 5 and under Ages 6+		
PARENT/GUARDIAN SIGNATURE		

## TOWN OF NORTH KINGSTOWN RECREATION DEPARTMENT

**100 Fairway Drive** 

#### North Kingstown, Rhode Island 02852

Phone (401) 268-1542

### MINOR'S CONSENT TO PARTICIPATE AND HOLD HARMLESS AGREEMENT AND RELEASE

I, (Print Name of Minor's Parent or Legal Guardian)\_\_\_\_\_\_state that

(Print Minor's Legal Name)minor") the minor wishes to participate in (Print N	(hereafter referred to as "the Jame of Event or Program)
Spo	onsored by the North Kingstown Recreation Department (the "Recreation
Department").	The state of the s
The minor's parent(s) or guardian(s) understand the minor does not have to participate. It is understoom the minor's person or damage to the minor's property.	hat participation in the above event or program is VOLUNTARY and that the od that the event or program involves activities which could result in injury to erty, and that by participating, the minor's parent(s) or guardian(s) voluntarily or damage to the minor's property and consent the minor's participation in the
It is understood that the Recreation Department D	OCES NOT provide any insurance coverage for the minor's person or property that they are responsible for the minor's safety and the minor's own health carety.
release from liability, indemnify, and hold harmle injury to the minor's person or damage to the min minor's participation in the event or program, who by any negligence or want or care on the part of the This Hold Harmless Agreement and Release sha interest, and/or any person(s) suing on the minor's The minor's parent(s) or guardian(s) understand representations made to them concerning this doct officers, agents and/or employees.  PARENT OR LEGAL GUARDIAN MUST SIC I, the undersigned, state that I am the parent or I above terms and conditions apply to said minor an circumstances in the above specified event or p	I that this document is complete unto itself and that any oral promises of ument and/or its terms are not binding upon the Town of North Kingstown, it
BY INITIALING I AGREE TO THE UNRESOLVED USE OF N OTHER DEPICTIONS) FOR PUBLICIZING NORTH KINGSTO	MY CHILD'S NAME AND/OR LIKENESS (INCLUDING PHOTOGRAPHS, VIDEO TAPES, AND OWN RECREATION ACTIVITIES AND EVENTS.
Minor's Name (PRINT):	Birth date of minor:
Home State of minor:	Today's Date:
Parent/Guardian Legal Name (PRINT):	
Parent/Guardian Legal Name (SIGN):	

#### Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19 is extremely contagious** and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

**North Kingstown Rec Programming** has put in place preventative measures to reduce the spread of COVID-19; however, NK Rec **cannot guarantee** that you or your child(ren) will not become infected with COVID-19. Further, **attending NK Rec Programming**, **being exposed to the public, could <u>increase</u>** your risk and your child(ren)'s risk of contracting COVID19

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By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending NK Rec Programming and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, NK Rec employees, volunteers, and program participants and their families even though North Kingstown Recreation is taking all possible precautions.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at NK Rec Programs or participation in NK Rec programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless NK Rec, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of programs, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any programming.

Signature of Parent/Guardian	Date
Print Name of Parent/Guardian	Print Name of Participant(s)