

Power-Full Fun Days

Enjoy the Day at



ACPS School Professional Day

December 12, 2011

Make this a real Holiday!

Come for some great FUN including....

ARTS & CRAFTS, SPORTS & GAMES

9:00am-6:00pm, K-8th Grade Youth, \$10.00*

Snacks provided. Bring a bag lunch.

**\$5.00 with free/reduced school meals letter*

**AT: Charles Barrett, Charles Houston, Cora Kelly,
Mt. Vernon, Nannie J. Lee, Patrick Henry
& William Ramsay Recreation Centers**

Youth currently enrolled in Power-On at the locations above may attend on 12/12 at no additional cost.



Department of Recreation, Parks & Cultural Activities
Call 703.746.5429 or 703.746.4343 for more information.





CITY OF ALEXANDRIA
Recreation, Parks and Cultural Activities
Power-Full Fun Days



Choose Recreation Center Location

- Charles Barrett Charles Houston Cora Kelly Mount Vernon
 Nannie J. Lee Patrick Henry William Ramsay

Please return to location checked above or Lee Center, 1108 Jefferson Street, Alexandria 22314
 For more information, call 703.746.5429/4343.

PLEASE PRINT

Name of Participant _____ Birth Date _____ Age _____ Sex _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ School _____ Grade _____

PARENT/GUARDIAN INFORMATION:

Mother's Name _____ Mother's Work # () _____ Mother's Cell # () _____

Father's Name _____ Father's Work # () _____ Father's Cell # () _____

email address: _____

Mother's Work Location _____ Father's Work Location _____

Mother's Work Address _____ Father's Work Address _____

*Emergency Contact #1 _____ Phone # () _____ Cell # () _____

*Emergency Contact #2 _____ Phone # () _____ Cell # () _____

* Emergency Contacts must be someone other than the parents.

****Person(s) authorized to pick up child:**

Name # 1 _____ Phone # () _____ Cell # () _____

Name #2 _____ Phone # () _____ Cell # () _____

Does your child have medical conditions or special needs we need to be aware of, such as allergies or intolerance to foods, medications, or behavior? Yes No If "yes", please explain condition:

I give the Department of Recreation, Parks and Cultural Activities, Recreation Services Division, permission to acquire emergency treatment at my expense for the participant named above. In consideration of the City of Alexandria, Department of Recreation, Parks and Cultural Activities, conducting various programs, the undersigned realizing the risk of injury attendant to such programs, does hereby and forever discharge the City of Alexandria, Department of Recreation, Parks and Cultural Activities and its officers, agents and employees from any and all action, claims or liability resulting from or arising out of or based upon any bodily injury or property damage which may be sustained by the undersigned or the undersigned's child while participating in such programs.

SIGNATURE REQUIRED OF PARENT/GUARDIAN _____ **Date** _____

-----Office Use Only-----

Fee \$10 ___ Fee Asst. \$5.00 ___ cash ___ Check # _____ Money Order _____ Staff _____