

# Alton Parks & Recreation CHRISTMAS WORKSHOP FOR KIDS (Ages 5-13)

Saturday, December 12th, 2015, 9 am—1 pm  
Gordon Moore Park, Muenstermann Bldg.

\$20.00 per child includes:

4 hours of holiday shopping time for parents!!!

\*Crafts & gifts to make—up to 4 per child

\*Holiday games

\*Face painting

\*Holiday photos with scenes & props

-includes 1 free 4" x 6" photo of each registered child  
-Additional photos \$1 each. -Family & friends photos \$1 each

\*Christmas movies

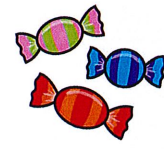
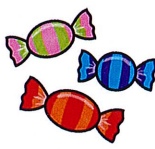
\*Cookie decorating (12 pm)

\*Lunch (after 12 pm)

**Pre-registration is required!**

Use form on back or register online!

For more information, call 463-3580



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**Alton Parks & Recreation**  
2 Emmie L. Kaus Ln., Alton, IL 62002  
Phone: 463-3580

**2015 CHRISTMAS WORKSHOP FOR KIDS AGES 5-13**

**Saturday, December 12th, 9 am - 1 pm at Gordon Moore Park, Muenstermann Bldg.**

**Fee: \$20.00 per child**      **Late pick-up fee: \$5.00 per 5 minutes**      Drop-off: 8:45-9:00      Pick-up: 1:00-1:05 pm  
**Registration deadline: Wednesday, December 9th**      (Proof of age required for 5-yr-olds.)

Please print (All are required except email.)

Name \_\_\_\_\_

DOB \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_ Zip \_\_\_\_\_

Medical conditions \_\_\_\_\_

Parent's name \_\_\_\_\_

Phone during event \_\_\_\_\_

Email \_\_\_\_\_

Additional contact name \_\_\_\_\_

Phone during event \_\_\_\_\_

I, the undersigned, give permission for the above-named child to participate in the Alton Parks & Recreation 2015 Christmas Workshop. I confirm that my child is at least 5 years old as of 12/12/15 and that he/she has no physical, mental, or other condition that would prevent him/her from participating in all activities. I agree to all details listed above. I agree to release the City of Alton, its employees or volunteers, from any liability for injury or loss as a result of participation. I agree that Alton Parks & Recreation has the right to have me pick my child up early for any medical, behavioral, or other issues and that there will be no refund.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date