

BROOKSIDE BEACH LASER TAG

TUESDAY JUNE 30, 2015 7-7 P.M.

**Sponsored by Mendham and Chester Township Recreation & the Mendham-Chester
Municipal Alliance**

For Students Ages 10 & Up from the Mendhams & the Chesters

Laser Tag at Brookside Beach, complete with an inflatable city. Come and enjoy laser tag, swim and music at the Beach. Registrations received by June 25, 2015 are \$45 per child, \$15 per sibling. Registration received after June 25 is \$50 per person, \$20 per sibling. **SPACE IS LIMITED AND OPEN TO THE FIRST 50 PAID REGISTRATIONS.**

Complete the form below and return it to the Mendham Township Recreation Department, P.O. Box 520, 2 West Main Street, Brookside, NJ 07926. Your check needs to be made payable to: **MENDHAM TOWNSHIP**. For multiple children registering please send only one check, you will need to complete a registration form for each child participating so we have all necessary medical information. In case of rain, a cancellation notice will be emailed to all participants by 12:00 noon that day and posted on our website: www.Mendhamtownship.org

Brookside Beach Laser Tag Tuesday June 30, 2015 4:00 – 7:00 P.M.

CHILD'S NAME: _____ GRADE: _____

ADDRESS: _____

HOME PHONE # : _____ CELL #: _____

EMAIL: _____

ALLERGIES OR MEDICAL CONDITIONS: _____

EMERGENCY CONTACT INFORMATION

PARENT/GUARDIAN NAME & NUMBER: _____

PARENT/GUARDIAN NAME & NUMBER (2): _____

DOCTOR'S NAME & NUMBER: _____

PARENTAL CONCENT: I hereby grant permission for my child/children to participate in all activities fo the Mendham township Laser Tag Program. I assume all risks and hazards incidental to the conduct of the program activities and transportation to and from the program. I do further release, absolve, indemnify, and hold harmless organizers, sponsors and agents of Mendham Township or any fo the supervisors appointed by them.

I GIVE MY () SON () DAUGHTER PERMISSION TO PARTICIPATE

Parent's Signature; _____ Date: _____