

## Saturday, December 15 9:00-11:00am

## Town of Tonawanda Senior Center 291 Ensminger Road

\$5 per person (children two and under free; includes bagels, donut holes, juice, milk, hot chocolate, and coffee)

Registration open October 22-December 11 (or until sold out) See page 2 for registration Get your picture taken with Santal

Hear Mrs. Claus read "The Night Before Christmas"

Entertainment by The Hill Brothers

Get a candy cane

Meet Santa's friends

Kenmore-Tonawanda UFSD neither endorses nor sponsors the organization or activity represented in this material.

The distribution of this material is provided as a community service.

## **REGISTRATION FORM**

## **Registration Locations:**

Youth, Parks & Recreation Department, 299 Decatur Road, Mon-Fri 8am-4pm Aquatic & Fitness Center, One Pool Plaza, Mon-Fri 6am-9pm, Sat 8am-6pm, Sun 9am-5pm Senior Citizen Center, 291 Ensminger Road, Mon-Fri 8:30am-4:30pm Paddock Chevrolet Golf Dome, 175 Brompton Road, Daily 9am-8pm

Ac	lult Registrant or	Parent/Guardian Name				_
Ac	ldress		Home Phone	( )		_
Ci	ty	Zip Code_	Work Phone (	)		_
E-	mail Address		Cell Phone (	)		_
Ιa	uthorize the TOT	Youth, Parks & Recreation D	Department to contact us by en	mail. This can b	e changed a	t a later date
Pro	ogram Name	Participant's First Name	Participant's Last Name	Birthdate	M/F Circle	Fee
Break	sfast with Santa				M F	
					M F	
					M F	
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The unde nawanda	("Town") whether od	ests and is granted permission to par ocurring on its premises or elsewhere	ticipate in classes, activities programse. In consideration of participation in		nsored by the T	
<ol> <li>RELEASE, DISCHARGE AND COVENANT NOT TO SUE the Town, its Board, Officers, Employees and/or Agents from any and all claims for persor al injury or property damage, except those resulting from the Town's negligence, arising out of participation in any such class, activity, program or event, and further agrees to hold harmless the Town from any claims, judgments or expenses the undersigned may incur by participation in the described activity.</li> </ol>						
	UNDERSTAND that participation in the described activity involves danger and risk of injury. The inherent danger is understood and voluntarily assumed.					
himself/he	erself and all liability to	o others for failure to do so. No oral	and safety regulations and will comply representations or inducements have the thereof shall continue in full legal fo	e been made prior to	on ASSUMING Assigning this ag	ALL RISK for reement. If any
STAND A			S A RELEASE OF CLAIMS ON THE ( ON BEHALF OF MYSELF OR IN M			
	Authorized	Signature		te		
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Date:_		Initials: Fa	acility	Res Proof		
Method	d of Payment: 🗆	Cash □ Check □ MC	□ VISA □ Discover □ 0	Other		
		Credit Cards not accepted thr	ough the mail or over the pho	ne at any locatio	on!	