



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

PARENTS' NIGHT OUT



Jan 4	<input type="checkbox"/>
Feb 1	<input type="checkbox"/>
Mar 7	<input type="checkbox"/>
Apr 4	<input type="checkbox"/>

Ages: 8 weeks –12 years
6:00–8:30 PM
KERASOTES CHILD WATCH

\$10 Members \$16 Members (Food provided) \$20 Public \$26 Public (Food provided)

Our youngest members are an active bunch. Parents need a break. We get it at the Y, so we offer Parents' Night Out. Your kids will play, do fun activities and run all those wiggles out.

If registered for food, we will provide water bottles, pizza and snacks. Children are welcome to bring their own dinner too!

Registration Form (one form per person)

We are only able to take 32 children so register today!

Name _____ M F Birth Date _____

Address _____ City _____ State _____ Zip _____

Home # _____ Cell # _____ e-mail _____

Authorized to pick up: _____

I would like to make a gift to help a child participate in Y programs. I am adding \$_____ to my Parents' Night Out registration for the YMCA Strong Kids Scholarship Fund. All gifts are tax deductible.

I hereby register my child for the YMCA Parents' Night Out. I have reported all pertinent health information. I allow the YMCA to seek emergency care for my child if required. I also grant the YMCA permission to use photographs of my child in promotional material such as brochures, ads, websites, or newspaper releases. I will not be informed or reimbursed for such photographs.

Name _____ Date _____

Signature _____

For Office Use Only: SAP20 Branch 2 Date _____ Amount _____ Staff _____
