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## REGISTRATION INFORMATION

### 2019 SINKING SPRING PLAYGROUND

A 9-week program from June 10th - August 9th and includes: Activities, Crafts, Field Trips.

**DATES:**

June 10th - August 9th

Closed July 4th

**HOURS:**

9:00 am - 1:00 pm | Monday - Friday

6:00 pm - 8:30 pm | Monday - Thursday

**TWO LOCATIONS:**

\* Sinking Spring Playground (Main) | 200 Evans Ave. & Ruth St., Sinking Spring, PA 19608

\* Brookfield Manor Playground | Brookfield Avenue and Brook Hollow Drive, Sinking Spring, PA 19608

**COST:**

Sinking Spring Playground Program

\* Residents of Sinking Spring Borough: \$50 per child (\$130 family max)

\* Non-Residents: \$85 per child (\$225 family max)

\* Need based reduced rate available: Contact the Borough office 610-678-4903 for requirements.

**HOW TO REGISTER:**

1. Register by filling out form below. Each child MUST have his/her separate form.

2. Submit payment

\* Online via Paypal at: <https://tinyurl.com/y5fjst6b> (small fee will apply) OR

\* Make check payable to "Borough of Sinking Spring" & Mail-in/Deliver to: Sinking Spring Borough Hall 3940 Penn Ave.  
Sinking Spring, PA 19608 | (610) 678-4903

PLEASE NOTE: Registration will only be complete after payment is received.



## REGISTRATION FORM 2019 SINKING SPRING PLAYGROUND

<b>PLAYGROUND CHOICE:</b> Choose location that you would like to attend (you may register for one or both): _____ Main Playground on Ruth St. _____ Brookfield Playground on Brookfield Ave	
Child's Name (Last/First):	Child's Age:
Child's Home Address:	
<b>CHILD'S T-SHIRT SIZE</b>	_____ XSmall Youth    _____ Small Youth    _____ Medium Youth    _____ Large Youth _____ XLarge Youth    _____ Small Adult    _____ Medium Adult    _____ Large Adult
<b>CONTACT INFORMATION</b>	
Parent/Guardian 1 Contact Name (Last/First):	
Parent/Guardian 1 Home #:	Parent/Guardian 1 Cell #:
Parent/Guardian 1 Email Address:	
Parent/Guardian 2 Contact Name (Last/First):	
Parent/Guardian 2 Home #:	Parent/Guardian 2 Cell #:
Parent/Guardian 2 Email Address:	
<b>EMERGENCY CONTACT INFORMATION</b>	
Emergency Contact Name (Last/First):	
Emergency Contact Home #:	Emergency Contact Cell #:
<b>MEDICAL INFORMATION &amp; AUTHORIZATION</b>	
Does your child have a diagnosed or mental condition/disability that requires special accommodations? If yes, please explain:	
Does your child have any other limitations or conditions? If yes, please explain:	
Please list any allergies (medications and/or food):	

COMPLETE OTHER SIDE OF FORM ⇒



## REGISTRATION FORM 2019 SINKING SPRING PLAYGROUND

THE FOLLOWING INFORMATION IS FOR EMERGENCY USE ONLY	
Type of Medical Insurance Plan:	
Medical Insurance Policy #:	
Physician Name:	Physician Phone #:
<p>I/We, give my/our permission for my/our child to...</p> <p><input type="checkbox"/> Participate in Sinking Spring Playground activities.</p> <p><input type="checkbox"/> Receive medical treatment by a first aid-certified individual, EMT, nurse, doctor, or hospital if necessary. It is understood that the adult in charge will attempt to contact me/us.</p> <p><input type="checkbox"/> Be transported by automobile or bus by employees or agents of the Borough of Sinking Spring, when in connection with events sponsored by the Borough.</p>	
<p>Please indicate your payment method. Registration will only be complete after payment is received.</p> <p><input type="checkbox"/> <b>Paypal Online:</b> <a href="https://tinyurl.com/y5fjst6b">https://tinyurl.com/y5fjst6b</a></p> <p><input type="checkbox"/> <b>Mail-in/Deliver Check or Cash:</b> Make check payable to "Borough of Sinking Spring" &amp; Mail-in/Deliver to: Sinking Spring Borough Hall 3940 Penn Ave. Sinking Spring, PA 19608   (610) 678-4903</p> <p><b><u>Sinking Spring Playground Program</u></b></p> <ul style="list-style-type: none"> <li>• Residents of Sinking Spring Borough: \$50 per child (\$130 family max)</li> <li>• Non-Residents: \$85 per child (\$225 family max)</li> <li>• Need based reduced rate available: Contact the Borough office 610-678-4903 for requirements.</li> </ul>	
Signature of Parent/Legal Guardian 1	Date:
Signature of Parent/Legal Guardian 2	Date: