



Sherman Historical Society Kids@Northrop Programs

The Sherman Historical Society is excited to continue our ½ day and vacation day programs for kids. The Kids@Northrop children's programs will give the kids an educational and fun look into the past. All programs will meet at the Northrop House and if it corresponds to an early dismissal, we will meet your child at the school and walk them to the Society for lunch (which you will provide) and then the fun begins.



Valentines

Tuesday, February 13th
12:30-3:15 pm
Open to 1st through 4th grade



Hibernation

Tuesday, March 13th
12:30-3:15 pm
Open to 1st through 4th grade



Peter Rabbit/Gardening

Tuesday, April 10th
12:30-3:15 pm
Open to Kindergarten through 3rd

Please complete the registration form and mail to the SHS, with your payment ASAP, as space will be limited to 18 children/program

Pricing: Each Program is \$15 for Members, \$20 Non-Members.
If you have two children, the price is \$25 for members, \$35 for Non-Members

Curriculum: Each session will include a cooking component, craft and educational activity.

Details:

- We will walk the children from school and have them eat their lunch before our program.
- **Please pack a lunch and a water bottle.**
- We will provide water to refill the water bottles and a snack they make at the end of the program.
- The Kids will be outside for a portion of the program, so please watch the weather and make sure that have appropriate clothing and shoes.
- If you do not go to the Sherman School, please arrive at the Northrop House at 12:30 for the ½ day programs.
- Should you have any questions, please feel free to contact the Society at: office@shermanhistoricalsociety.org or 860-354-3083

Kids@Northrop Programs Registration

Name (child) _____ Age _____ Grade _____

Check here if we have current 2017-2018 information on file _____ (no need to provide contact info again if we do)

Address _____ Town _____ Zip _____

Parent(s) _____

Primary Phone (home) _____ (cell) _____

Email Address: _____

Emergency Contact/ Phone _____ Relationship _____

Medical/Behavioral Needs _____

Allergies _____

Dietary Restrictions _____

Please select the Program(s) you are interested in:

Each Program is \$15 for Members, \$20 Non-Members. 2 or more children: \$25 for members, \$35 for Non-Members

Valentines – February 13th (12:30-3:15pm) \$ _____

Hibernation – March 13th (12:30-3:15pm) \$ _____

Peter Rabbit/Gardening – April 10th (12:30-3:15pm) \$ _____

Membership (if you would like to join. Membership year is from Sept 1st 2017-Aug 31st 2018) \$ _____

Household \$30, Sponsor \$50, Patron \$100, Life \$500

Total Due: \$ _____

RELEASE OF LIABILITY and PHOTO RELEASE:

I understand and acknowledge the risks of injury that are inherent in any program involving outdoor activities as well as arts & crafts projects using simple tools, such as hammers, saws, scissors, etc. As parent/guardian of the child registered herein, I hereby waive and release all rights and claims for damages I may have against the Sherman Historical Society and the staff/counselors of the Kids@Northrop Program(s) for any loss of property or for any and all injuries that may be sustained in connection with participation in this program. In case I cannot be reached at the phone numbers provided, I do hereby give my consent to medical care, emergency or otherwise, including any necessary transportation, in the event of injury to my child/ward. Expenses incurred in obtaining emergency medical aid will be borne by me.

I also give permission for my child to be signed out, at dismissal, to the staff/counselors of the Kids@Northrop Program(s) and walked to the SHS at 10 Route 27 Center, Sherman.

The undersigned parent and/or natural guardian does hereby represent that he/she is, in fact, acting in such capacity, has consented to his/her child or ward's participation in the Kids@Northrop Program(s), and has agreed individually and on behalf of the child or ward, to the terms of the accident waiver and release of liability set forth above. The undersigned parent or guardian further agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim or damages whatsoever, which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and parents or legal guardian.

AND: I hereby give the Sherman Historical Society permission to use any and all photographs or videos taken during the course of the Kids@Northrop Program(s) for marketing, publicity or advertising efforts.

Parent/Guardian Signature: _____ Printed Name: _____ Date: _____

Please mail this completed Registration Form & check made out to 'Sherman Historical Society' ASAP, as space will be limited, to: SHS, 10 Route 37 Center, Sherman CT 06784