

2026 SAFETY TOWN REGISTRATION FORM



Participant Information:

First Name _____ Last Name _____

Gender: M F Other: _____ Date of Birth _____ Phone (_____) _____

Address (street, city, state and zip code) _____

Check the box for which week you are interested in signing your child up for:

	<u>Morning Session Price: \$129</u> 8:15am-11:45am	<u>After Care Session Price: \$149</u> 11:45am-5:30pm
June 22 - 26	<input type="checkbox"/> Session 1 ID# 8801.401	<input type="checkbox"/> Session 1 ID# 8802.401
July 6 - 10	<input type="checkbox"/> Session 2 ID# 8801.402	<input type="checkbox"/> Session 2 ID# 8802.402
July 13 - 17	<input type="checkbox"/> Session 3 ID# 8801.403	<input type="checkbox"/> Session 3 ID# 8802.403
July 20 - 24	<input type="checkbox"/> Session 4 ID# 8801.404	<input type="checkbox"/> Session 4 ID# 8802.404
July 27 - 31	<input type="checkbox"/> Session 5 ID# 8801.405	No After-Care offered July 27-31

**(100% scholarship families pay \$5 total for the morning program and \$10 total for the after care.)
Scholarships can be used for the morning and after care. This would count as the 1 usage.**

Please complete the following questions - All questions must be answered to complete the registration.

- 1) School Attending in Fall 2026: _____ 2) Grade for Fall 2026: Y5 K 1st
- 2) Select the size t-shirt your child wears: YS YM YL
- 3) In order to provide your child with the correct size bike helmet we need you to enter your child's head circumference. Measure your child's head, using a fabric tape measure in inches, just above the eyebrows and around the back of the head. You're trying to find the widest part of the head to ensure your child has the right size bike helmet. Choose the helmet size required based on the **INCHES** measured:
 XS (20" - 21.25") YM (21.3" - 22.5") YL (22.55" - 24.5")
- 4) **Friend Requests:** Your child will automatically be placed with children attending the same elementary school. If you have special friend requests please write first and last names (you may list up to 5 names)

- 5) **Authorized Pick-Ups:** Please list the names of all adults (including parents/guardians) who have permission to pick up your child.

- 6) Does your child carry an inhaler? Yes No
 a) If yes, will your child bring this medication with them to camp? Yes No
- 7) Does your child have/carry an Epi Pen? Yes No
 a) If yes, will your child bring this medication with them to camp? Yes No
- 8) List any allergies or medical conditions:

9) Does your child have an IFSP, IEP or 504? Yes (please fill out the Special Needs Planning Form online) No

10) Does your child have a teacher's assistant assigned to them during the regular school day? Yes No

11) Name & phone number of an emergency contact person who can immediately pick up your child in the case of an emergency _____

12) What address would you like your child to learn?(include street, city, state and zip code)

13) What phone number would you like your child to learn? _____

14) All students must be potty trained prior to the start of camp. Is your child potty trained? Yes No

15) Provide the best email address for us to send camp information/updates: _____

16) Which race or ethnicity best describes your student? **This question is optional.** _____

SAFETY TOWN PERMISSIONS & AGREEMENTS

Safety Town 1/2 Day Program Waiver: By registering my child I am agreeing to all of the following:

1)I will provide a morning snack that is nut-free. 2)If my child's extreme behavior puts another child in danger, I will pick my child up promptly upon request and I understand that my child may not be able to return to the program. 3)If offered, I give my permission to AAPS Safety Town program for my child to be transported in a school bus within the Wines Elementary School neighborhood for the School Bus Safety Training. 4)I give my permission to the AAPS Safety Town Program for my child to Participate in the Fire Safety House. To opt out of the Fire Safety House or to ask more questions you will need to email: safetytown@aaps.k12.mi.us.

Safety Town Camp Program Waiver: By registering my child I am agreeing to all of the following:

1)I will provide a nut-free morning snack, afternoon snack and lunch. 2)If my child's extreme behavior puts another child in danger, I will pick my child up promptly upon request and I understand that my child may not be able to return to the program. 3) I agree to pay a late fee of \$5 for the first five minutes and \$3 per minute thereafter that my camper is left at camp past 5:30 pm

Photo & Social Media Waiver: I understand and agree that the Ann Arbor Public School's Rec & Ed Department may take pictures or videos of youth and adult participants in any Rec & Ed activity, including classes, team sports, and childcare. Images may be used in Rec & Ed or school district promotional materials, (brochures, catalog, website, social media). For your safety, names will never be used, we do not grant authorization for any 3rd party to produce, reproduce (or reuse), edit videos, take pictures, print, and record sound of an individual. My (or my child's) enrollment in an activity with Rec & Ed indicates my approval. I may opt out by emailing williams@a2schools.org.

By my signature, I attest that I have read and understand the Safety Town 1/2 Day & Camp Program, the Photo Release Waivers listed above. I am aware that these waivers are a release of liability and I voluntarily agree to its terms.

Parent Signature _____ **Date** _____

Payor Information:

First & Last Name _____ Gender: M F Other: _____ Date of Birth _____

Address _____ City _____ State _____ Zip Code _____

Email Address _____ Phone (_____) _____

Payment Information:

Cash Check (Made out to Ann Arbor Public Schools) Credit Card Scholarship

PRINT NAME EXACTLY as it appears on the credit card: _____

VISA MASTERCARD AMEX CARD # _____

Expiration Date _____ CVC # (security code) _____ Amount Charged \$ _____

Signature (REQUIRED) _____

I agree to pay the above total amount according to the card issuer's agreement and the Community Education & Recreation [Refund/Credit Policy](#) as listed on the website.

All Credit Card transactions will be charged an additional non-refundable processing fee of 2.2007% plus a flat fee of \$0.29