



AASD in partnership with Appleton Parks and Recreation Summer Playground Program

Students will participate in supervised lunch at the school site, and a summer school staff member will walk with them to the local park to participate in the Playground Program run through the Appleton Parks and Recreation, which starts at 1:00 p.m. Once at the park, students are under the supervision of the Appleton Park and Rec staff. Registration is required. Please complete and return the form on the other side and return to the school c/o Summer School Coordinator. Lunch and walk may be cancelled due to weather, and parent would be notified during summer school hours.

(Monday through Thursday only. Not available on Fridays!)

- **Classical:** Ferber Playground 1:00-4:00 M-Th (bring a bagged lunch)
- **Edison:** Peabody Park 1:00-4:00pm M-Th (free lunch at school first)
- **Ferber:** Ferber Playground 1:00-4:00 M-Th (bring a bagged lunch)
- **Franklin:** Erb Park 1:00-4:00 M-Th (bring a bagged lunch)
- **Highlands:** Kiwanis Park 1:00-4:00pm M-Th (free lunch at school first)
- **Huntley:** Huntley Playground 1:00-4:00pm M-Th (bring a bagged lunch)
- **Jefferson:** Alicia Park 1:00-4:00pm M-Th (free lunch at school first)
- **McKinley:** Hoover Park 1:00-4:00pm M-Th (bring a bagged lunch)
- **Einstein:** Ferber Playground 1:00-4:00 M-Th (bring a bagged lunch)
- **Madison:** Hoover Park 1:00-4:00pm M-Th (bring a bagged lunch)
- **Wilson:** Linwood Park 1:00-4:00pm M-Th (free lunch at school first)

Cost: Free. College-aged leaders create an interactive and enjoyable summer for children ages 6-13 on a drop-in basis. Participate in sports, games, special events, trips, creative crafts and much more throughout the summer. Visit www.appletonparkandrec.org or call 832-5905 for further details.

SUMMER SCHOOL WALK TO PARK PROGRAM PERMISSION SLIP

(Please complete and return to your Summer School Site in c/o the Summer Coordinator)

Student Name _____ Gender ____ M ____ F Date Of Birth _____
Address _____ Apt # _____ City _____ Zip _____
Summer School site attending _____
Special Health Concerns/Medical Diagnoses: _____
Parent/Guardian Name _____ Phone # _____
Work # _____ Cell # _____ E-mail Address _____
Parent/Guardian Name _____ Phone # _____

In case of absence or emergency, the number to call *first* to contact a legal guardian between 11:30am-1:00pm is: _____.

I give my student permission to participate in supervised lunch at the school site. Students at Classical, Ferber, Franklin, Huntley, McKinley, Einstein, and Madison are required to bring a bagged lunch. Students at Edison, Highlands, Jefferson, and Wilson may participate in the Free Lunch program at school. I also give permission for a Summer School staff member will walk with my student to the designated park to participate in the Playground Program. Once at the park, students are under the supervision of the Appleton Park and Rec staff. Lunch and walk may be cancelled due to weather, and parent would be notified during summer school hours and need to pick student up at the conclusion of summer school classes. All Appleton School District policies for the regular academic school year regarding dress, behavior and school safety are in effect during Summer School. I hereby authorize summer school personnel to obtain emergency medical care for my child if needed.

Parent/Guardian _____

APPLETON PARKS AND RECREATION PLAYGROUND PROGRAM REGISTRATION FORM

Is your child ready to keep active this summer and be with friends? Join us this summer for the Playground Program where two college-aged leaders create an interactive and enjoyable summer. This program is a drop-in program where your child can participate in sports, games, special events, trips, arts and crafts and much more throughout the summer. Children must be ages 6-13 to participate. Program hours include Monday-Thursday 9:00-12:00 and 1:00-4:00. More information is available online at www.appletonparkandrec.org

NAME: _____ AGE: ____ PARK ATTENDING: _____

PARENTS NAME: _____

ADDRESS: _____

HOME/CELL PHONE: _____ DAYTIME PHONE: _____

EMERGENCY CONTACT(S) NAME AND NUMBER: _____

ALLERGIES/MEDICAL INFORMATION OF NOTE: _____

Parent/Guardian Signature: _____