



The Hunterdon County
Employee Appreciation Committee
Is sponsoring
Bring Your Child to Work Day



April 28, 2016

9:00-3:30

The Employee Appreciation Committee has planned a day of events for the children of County employees.

The following departments are offering events for that day:

- ▶ Public Safety Department - Hazmat
- ▶ Parks - Golf Course , Nature Walk , Fishing clinic
- ▶ Health Department - Insects and Bugs

Lunch will be provided by the committee at Echo Hill.

If you are interested in enrolling your child(ren) in this program you must complete a registration/permission form and return it to **Pia Rey-Doklan** by **April 18, 2016** or call **908-806-4174**.

- **The age range for this event is 8 -13.**
- **Space is limited so sign up early.**
- **Children who are not pre-registered will not be able to attend.**
- **Children will be transported by van to each destination by EAC Members.**
- **If you choose to accompany your child, you must use benefit time.**

Please have your child dress appropriately for the weather and elements.

No open toe shoes please.

Children are to be dropped off at 9:00 AM and picked up at 3:30 PM at the
RT. 12 Complex Building #1 first floor meeting room.



HUNTERDON COUNTY
PROGRAM REGISTRATION FORM
Employee Appreciation Committee

Office Location: 1020 State Route 31, Lebanon
Mailing Address: PO Box 2900, Flemington, New Jersey 08822-2900
Phone: (908) 782-1158 * Fax: (908) 806-4057

PARTICIPANT(S) _____

ADDRESS _____
Street City/Town State Zip

PHONE (day) _____ (eve) _____ CELL PHONE _____

EMAIL ADDRESS _____

EMERGENCY CONTACT _____ PHONE (day) _____ (cell) _____

SECONDARY EMER. CONTACT _____ PHONE (day) _____ (cell) _____

IF THE PARTICIPANT IS UNDER 18 PLEASE PROVIDE: NAME _____ AGE _____ GRADE _____

NAME _____ AGE _____ GRADE _____

NAME OF PARENT OR GUARDIAN (PLEASE PRINT): _____

Please note that only children who are enrolled in 1st grade or above are eligible to participate. Children in younger grades will not be permitted to participate in this program.

IMPORTANT—PLEASE READ THE FOLLOWING STATEMENT:

I give permission for my child(ren) to participate in the County EAC "Bring Your Child To Work Day."

I hereby waive and release all rights and claims for damages against the County of Hunterdon and their employees and agents for all injuries, which may be sustained, by the herein named minor or myself while participating in the program listed above. I understand the content of the program and the risks of personal injury therein. I also give my permission for employees of the County and the Hunterdon Medical Center (or closest medical facility to the activity site) to admit me or my child for EMERGENCY medical treatment that would become necessary as a result of a medical emergency during this program. I also give permission to the County to make noncommercial use of any activity photographs of my child or myself. Any information provided will be treated with confidentiality and will allow the County to better serve individuals attending programs.

PRINT NAME _____

SIGNATURE OF PARENT OR GUARDIAN _____ DATE _____

ACCESSIBILITY STATEMENT: It is the policy of the County to provide reasonable accommodations to persons with disabilities upon advance notice of need. Persons requiring accommodations should make request at least 2 weeks prior to program attendance.

You may withhold this data, but you might not receive appropriate accommodations, without advanced notice.

DOES PARTICIPANT TAKE ANY MEDICATION (S) Yes ___ No ___ If so, what? _____

DOES PARTICIPANT HAVE ANY MEDICAL CONDITIONS OF WHICH THE STAFF SHOULD BE AWARE?

(Please Circle: Attention Deficit/Hyperactivity Disorder, Epilepsy, Diabetes, Asthma, Dietary Restrictions, Oppositional Defiant Disorder, etc.) Yes ___ No ___ Other _____

DOES PARTICIPANT REQUIRE ANY ACCOMMODATION FOR A DISABILITY? Yes ___ No ___

DOES PARTICIPANT HAVE ANY ALLERGIES? Yes ___ No ___ If so, please explain _____

DOES PARTICIPANT CARRY AN EpiPen? Yes ___ No ___

NOTES: _____

SIGNATURE OF PARTICIPANT(S) _____ DATE _____

(Parent/Guardian if under 18 yrs. of age)