Westwood Youth & Family Services'
Girls Groups Registration

Name of Child: _____ Date of Birth: _____

Name of Parent(s)/ Guardian(s): _____ Entering Grade (Fall 2011): _____

Address: _____ School attending _____

Telephone #: _____

_____ Email: _____

Has your daughter completed a Girls Group with WY&FS in the past? Yes:____ No:____

Will your child attend Extended Day at either the Hanlon or Martha Jones School until 5:00PM?
Yes: _____ No: ____ If yes, which days and which school_____

Is there any day of the week that your child would not be able to attend? _____

Does your child have any food allergies or are there foods or beverages you otherwise do not want your child to have?

_____

What experience or skills would you like your child to gain through participation in the program?

_____
_____
_____
_____

Is there any other relevant information about your child of which we should be aware (social skill issues, medical conditions, learning issues, any recent significant life events, etc.)?

_____
_____
_____
_____

PLEASE COMPLETE PERMISSION SLIP ON REVERSE SIDE!

Permission

I, _____, give permission for my child, _____, to participate in Westwood Youth & Family Services' Girls Group program. I have been made aware of the program and understand its structure and goals. Though children are well-supervised by adult facilitators and activities are planned indoors with safety in mind, accidents do have the potential to occur. I voluntarily accept these conditions and agree not to hold Westwood Youth & Family Services or its employees liable for any injury that my child may incur while participating in the structured playgroup program. I also acknowledge that age appropriate video clips may be utilized as a mode for reinforcing a session's topic.

_____ _____

Parent/Guardian Signature Date

Sometimes parents and/or children are interested to know who will be in the same group section with them prior to the start of the group. Do you give permission for us to let other participants know in advance which group section your child will be attending? Yes: _____ No: _____

Please return registration to the following address:

Westwood Youth & Family Services, Islington Community Center
288 Washington Street, Westwood, MA 02090

Looking forward to seeing you this year!