

# **LYNN PARKS & RECREATION**

250 COMMERCIAL STREET  
LYNN, MA 01905

## **OFFICE**

PARK RANGER'S OFFICE  
106 PENNYBROOK RD  
LYNN, MA 01905

## **Summer Office Hours**

Monday through Friday  
8:00AM to 4:00PM

## **YOU CAN REACH US BY:**

PHONE: 781-477-7123

EMAIL ADDRESS: [lynnparksandrecreation@gmail.com](mailto:lynnparksandrecreation@gmail.com)

<http://www.facebook.com/#!/lynn.parks.319>

# 2017 Lynn Parks & Recreation

Parks Open Wednesday, July 5, 2017

The following parks will be supervised:  
Monday through Thursday 9:00AM – 3:00PM  
Friday's 9:00AM – 2:30PM  
From July 5<sup>th</sup> through August 4<sup>th</sup>

The City of Lynn will provide Park Instructors to the parks listed below. The instructors will provide the following activities during our 5 Week Program: Field Trips, Special Events, Wiffleball Games, Arts & Crafts, Sports Activities, Entertainment, and Fun for all ages. Lunch will be provided during park hours. The Parks Program is available for children 6 years or older. No child is required to remain at the park. **We do not provide INDIVIDUAL SUPERVISION or DAYCARE.**

On Rainy Days the Parks will be closed!

<b>BARRY PARK</b>	BOSTON ST (BETWEEN LAUREL & COTTAGE ST)
<b>CLARK ST. PLAYGROUND</b>	CLARK ST AT END (OFF EASTERN AVE)
<b>FLAX POND PLAYGROUND</b>	CHESTNUT ST (BETWEEN POND & CARTER RD)
<b>GALLAGHER PLAYGROUND</b>	ONTARIO ST-LINWOOD ST-HURD ST
<b>GOWDY PARK</b>	CEDARBROOK ROAD (BETWEEN TUSAN RD & MAPLE VALLEY)
<b>KEANEY PARK</b>	MEMORIAL PARK AVE (BEHIND LYNN ENGLISH HIGH SCHOOL)
<b>KILEY PLAYGROUND</b>	SANDERSON AVE – AT END (OFF CHATHAM ST)
<b>LYNNWOODS PLAYGROUND</b>	GREAT FALLS RD AT END (OFF LYNNFIELD ST)
<b>MARIAN GARDENS PARK</b>	ANDERSON WAY (IN MARIAN GARDENS COMMUNITY)
<b>MAGNOLIA PARK</b>	MAGNOLIA AVE – BEHIND SISSON SCHOOL

All programs are available – pending funding.

**LYNN PARKS & RECREATION**

250 COMMERCIAL STREET

LYNN, MA 01905

781-477-7123

**Please Print Clearly:**

Name of Playground \_\_\_\_\_

Name of Child \_\_\_\_\_ Sex \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Telephone # \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

**In Case of Emergency, Please List Two People Who We Should Contact:**

1. Name \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

Phone 1 \_\_\_\_\_

Phone 2 \_\_\_\_\_

E-mail Address \_\_\_\_\_

2. Name \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

Phone 1 \_\_\_\_\_

Phone 2 \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Does Your Child Have Any:**

Limitations

Illnesses

Allergies

If YES, please list & explain:

\_\_\_\_\_

\_\_\_\_\_

We, of the Lynn Parks & Recreation Program, will take all precautions against any casualties occurring while the children are involved in our activities. However, we are not financially or legally responsible for accidents that may happen while the children are in our presence. Before your child may be enrolled in our summer program, you must understand our position and accept it by signing below.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**LYNN PARKS & RECREATION  
EMERGENCY CARD INFORMATION**

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Child's Home Address: \_\_\_\_\_

Phone #: (     ) \_\_\_\_\_

**INSTRUCTIONS TO REACH PARENT/GUARDIAN**

1. \_\_\_\_\_  
Name Address Phone #

2. \_\_\_\_\_  
Name Address Phone

**PEDIATRICIAN OR SOURCE OF HEATH CARE**

\_\_\_\_\_  
Doctor's Name Address Phone #

**EMERGENCY CONTACT PERSON (S)**

1. \_\_\_\_\_  
Name Address Phone #

2. \_\_\_\_\_  
Name Address Phone #

**MEDICAL EMERGENCY TREATMENT**

I hereby give the Lynn Parks and Recreation permission to administer basic First aid and/or CPR to my child \_\_\_\_\_ and/or take my child, to a hospital and to secure medical treatment when I cannot be reached or when delay would be dangerous to my child's health.

\_\_\_\_\_  
Parent Signature Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Allergies, Chronic Health Conditions:  
\_\_\_\_\_

**Insurance Information (Optional)**

Company Name: \_\_\_\_\_ Policy #: \_\_\_\_\_

Participating Hospital: \_\_\_\_\_

Special Instruction: \_\_\_\_\_

# **LYNN PARKS & RECREATION**

## **2017 Field Trips**

### **LASER CRAZE**

Monday, July 10  
9:00 AM – 2:00 PM  
Laser Tag, 12 Tokens, Pizza, & Soda  
**Cost: \$30.00**

### **AQUARIUM**

Thursday, July 27  
9:00 AM – 3:00 PM  
**Cost: \$30.00**

### **SALEM WILLOWS**

Tuesday, July 11  
9:00 AM – 2:00 PM  
30 Tokens, Pizza, Soda, & Bumper Cars  
**Cost: \$20.00**

### **NAVIGATORS GAME**

Tuesday, August 1  
9:30 AM – 2:00 PM  
Hotdog, Chips, & Soda  
**Cost: \$10.00**

### **LEGO LAND**

Thursday, July 20  
9:00 AM – 2:00 PM  
**Cost: \$25.00**

### **MAYOR'S COOKOUT**

@ Gallagher Playground  
Wednesday, August 2  
9:00 AM – 3:00 PM  
Sports Activities, Inflatable  
Games, Lunch & more!  
**Cost: Free**

### **CASTLE CREEK**

Monday, July 24  
9:00 AM – 2:00 PM  
Mini Golf, Go-Carts, Ice Cream  
**Cost: \$25.00**

## **ALL COSTS INCLUDE ADMISSION AND TRANSPORTATION TO AND FROM EVENTS**

**The Lynn Parks & Recreation Department can only accept:  
Money Orders or Cash**

Please fill out the permission slip on the following page and turn it in with your registration.  
Any child without a completed field trip permission slip form  
will not be able to attend any field trips.

**LYNN PARKS & RECREATION  
250 COMMERCIAL ST.  
LYNN, MA 01905  
781-477-7123**

**FIELD TRIP PERMISSION SLIP**

Child's Name: \_\_\_\_\_

Playground: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Parent/Guardian's Telephone Number: \_\_\_\_\_

Please check either "YES" or "NO" for each of the following field trips. Your child will only be able to attend the field trips next to which "YES" is checked off.

<b>FIELD TRIP</b>	<b>DATE</b>	<b>Cost</b>	<b>YES</b>	<b>NO</b>
Laser Craze	July 10	\$30.00		
Salem Willows	July 11	\$20.00		
Lego Land	July 20	\$25.00		
Castle Creek	July 24	\$25.00		
New England Aquarium	July 27	\$30.00		
Navigators Game	August 1	\$10.00		
Mayor's Cookout	August 2	Free		

I give my child, \_\_\_\_\_, permission to attend the field trips to which I have indicated "YES."

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

# LYNN PARKS AND RECREATION

## 2017 Summer Arts and Crafts

- 1. PUFFY PAINT (Friday, July 7)** – MAKING PUFFY PAINT WITH GLUE, SHAVING CREAM, AND FOOD COLORING AND PAINTING A PICTURE ON CONSTRUCTION PAPER
- 2. COLORING CONTEST (Wednesday, July 12)** – A COLORING CONTEST WILL BE HELD AT EACH PARK; THE PERSON WITH THE BEST PICTURE (ACCORDING TO THE COUNSELORS) WILL WIN A SMALL PRIZE
- 3. BEADED BOOKMARKS (Thursday, July 13)** – USING BEADS, STRING, AND PAPER CLIPS TO MAKE YOUR VERY OWN BOOKMARK
- 4. FROOT LOOP JEWELRY (Wednesday, July 19)** – USING FROOT LOOP CEREAL AND PIPECLEANERS TO MAKE STYLISH & EDIBLE BRACELETS, NECKLACES, AND GLASSES
- 5. TIE DYE ART (Tuesday, July 25)** – A SPIN ON TRADITIONAL TIE DYING! USING MARKERS, ELASTICS, AND BABY WIPES TO MAKE YOUR OWN TIE DYED CLOTH
- 6. PAPER BAG JELLYFISH (Monday, July 31)** – MAKING JELLYFISH BY CUTTING & COLORING BROWN PAPER BAGS AND GLUEING GOOGLEY EYES
- 7. HAND MAGNET (Thursday, August 3)** – TRACE, CUT OUT, AND THEN DECORATE YOUR HAND AND PUT A MAGNET ON THE BACK TO HANG ON YOUR FRIDGE

**PARENTAL CONSENT AND RELEASE FORM LIABILITY**  
CITY OF LYNN PARKS AND RECREATION  
2017 SUMMER PROGRAM  
JULY 5<sup>th</sup>-AUGUST 4<sup>th</sup>

I/We, the undersigned parent(s) or guardian(s) of \_\_\_\_\_, a minor, do hereby consent to his/her participation in the City of Lynn Parks and Recreation 2016 Lynn Parks and Recreation Summer Field Trips.

I/We forever RELEASE, acquit, discharge and covenant to hold harmless the City of Lynn, a municipal corporation of the Commonwealth of Massachusetts, and its officers, employees, servants, and agents from any and all actions, causes of action, claims, demands, costs, loss of services, expenses and compensation on account of, or arising out of, directly or indirectly, any personal injuries or property damage which I/We may hereafter have as the parent(s) or guardian(s) of said minor, and also all claims or rights of actions for damages which said minor may acquire, either before or after he/she has reached his/her majority, resulting from his/her participation in the Field Trips.

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Signature of Parent(s) or Guardian(s)	Date	Relationship
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# PARENT/GUARDIAN Child Photo Release Form

Instructions: Fill in form, sign and return to a Lynn Parks and Recreation park counselor.

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

- I hereby **grant** permission for films, video and/or audio tape recordings, slides and photographs to be taken of during the Lynn Parks Program, including field trips and other parks-related activities. I understand that this media will be produced and used for promotional purposes. I authorize the Lynn Parks and Recreation to use my photograph on its World Wide Web site, the parks' social media sites, or in other official parks programs printed publications without further consideration, and I acknowledge the Lynn Parks and Recreation may choose not to use my photo at this time, but may do so at its own discretion at a later date.

I also understand that once my image is posted on the Lynn Parks and Recreation website, the image can be downloaded by any computer user. Therefore, I agree to indemnify and hold harmless from any claims the following: All employees of the Lynn Parks and Recreation Program.

- You **do not** have my permission for films, video and/or audio tape recordings, slide and photographs to be taken of for any reason.

This release will supersede any previous releases on file.

Parent/Guardian Name (Please Print) \_\_\_\_\_

Signature \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Date: \_\_\_\_\_