



City of New Hope

SAFETY CAMP

Join us for this popular three-day camp where participants will learn about safety while having a great time! Safety topics will include fire safety, internet safety, water safety, and much more! We'll see a K-9 demonstration and get up close to a helicopter! Children must be entering grades 3-5 in September 2008. A "graduation" ceremony and dinner will take place at 5 p.m. on August 14. Campers will be randomly placed in groups. This camp is sponsored by the Parks & Recreation and Police Departments of New Hope and West Metro Fire-Rescue District. The camp will be the same format as 2007. Register early--spaces are limited. Note: The graduation ceremony/dinner is at 5 p.m. on August 14. It is important for the camper to be in attendance.

Dates: Tuesday-Thursday, August 12-14

Time: 8 a.m.-4:30 p.m. (Drop-off times begin at 7:30 a.m.; Pick-up until 5 p.m.)

Location: Civic Center Park, 4401 Xylon Avenue North, New Hope

Fee: \$33 Residents of New Hope and Crystal

\$38 Nonresidents

(Fee includes shirt, snacks, lunches and graduation)

Register with: New Hope Parks & Recreation
4401 Xylon Avenue North
New Hope, MN 55428



Sponsors (as of 6/1/08): Police and Parks & Recreation Departments of New Hope; City of New Hope Staff; Twin West Chamber of Commerce; West Metro Fire-Rescue District; New Hope Crime Prevention; Process Displays Printing; NUCOM Ltd.; New Hope Women of Today; McLellan Plumbing Co.; BGrizzly's; Golden Valley VFW; Checker Machine; West Metro Fire-Rescue Relief Association

Refunds, program credits and transfers are allowed up to one week prior to the start of the program. In the event of illness or injury, refunds will be given when accompanied by a doctor's written verification. All refunds are subject to a \$5 service fee. Confirmations are NOT sent. **QUESTIONS?** Call 763-531-5151.

NEW Online Registration! Go to www.ci.new-hope.mn.us and click on *Rec Express*. You will need a Password and Client ID number to register online. Call 763-531-5151 to obtain this information.

2008 Safety Camp

4803

Child's Name _____ Phone (H) _____ (W) _____

Address _____ City _____ Zip _____

Birthdate _____ Age _____ Grade in fall 2008 _____ Sex _____ Parent/Guardian _____

Does participant have a special need? _____ Amount Enclosed \$ _____

I, the undersigned parent or guardian, authorize the City of New Hope to disclose to the City's insurer, attorney, staff, coaches, and other personnel involved in this program, the participant's name, address and telephone number for the purpose of program administration. I understand that the records are protected under state and federal privacy regulations and cannot be disclosed without my written consent unless otherwise provided by law. I hereby agree to allow the individual named herein to participate in the aforementioned activity, and further agree to hold the City harmless for any claim resulting from participation in this activity. I further give consent for any photos or videos taken during the program to be used by the City for promotional materials.

Parent/Guardian Signature _____ Date _____