



## February Break Activities at the Sherrill Community Activity Center

Visit [www.sherrillny.org](http://www.sherrillny.org) or call (315) 363-6525 for more information.

### Open Bowling Hours & Specials

Monday February 17, 12-5pm

Tuesday February 18, 12-5pm

Wednesday February 19, 10am-5pm

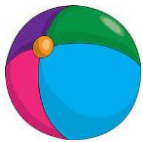
Thursday February 20, 12-4pm



Friday February 21, 12-10pm

*\*Kids in grades 8 & under bowl free from 12-2pm! Everyone else- \$5/2 games & shoes. \*Limit 2 games.*

### Other Activities at the CAC



**Kids Time, Monday February 17-Friday February 21, 10am-12pm-** kids 6 & under who are supervised by an adult are invited to come play in the gym!

**Free Family Open Gym, Monday February 17-Friday February 21, 12-4pm-** Come enjoy free family open gym time! Kids 14 and under must be accompanied and supervised by an adult.



**February Kids Bowling Camp, Tuesday February 18 & Friday February 21, 10am-12pm-** VVS students in grades preK-6 are invited to learn more about bowling, practice skills and have fun! The bowling camp will be led by VVS High School bowlers and CAC staff. Come one day or both days! The camp is free! Parents may drop kids off and pick them up and must fill out a registration form.

### February Break Activities at the Sherrill-Kenwood Library

Visit [www.sherrillkenwoodlibrary.org](http://www.sherrillkenwoodlibrary.org) or call (315) 363-5980 for more information.

**Children's Art w/VVS Senior Abbygail Coston, Tuesday February 18 at 1pm-** for students in grades 3-6, preregistration required

**Children's Art w/Mary Thompson, Thursday February 20, 1-3pm-** preregistration required

**Cocoa & Card Games, Friday February 21, 1-4pm-** Join us to play Uno, Old Maid and more & enjoy hot cocoa!

Have a great winter break!





## 2020 City of Sherrill February Bowling Camp Registration & Medical Authorization

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade 2019-2020: \_\_\_\_\_

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

Parent or Guardian: \_\_\_\_\_

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

Please check one:  Walk or Bike Home Alone and/or  Will be picked up

Name & Phone Number of Individual(s) Picking Child Up: \_\_\_\_\_

\_\_\_\_\_ (Participant's name) has my permission to attend the City of Sherrill February Break Activities located at the CAC 139 East Hamilton Ave. Sherrill, NY. I give the City of Sherrill and its duly authorized representatives the authority to seek any medical attention my child may need in the event he/she is injured in my absence. This includes ambulance transportation to any medical facility and any medical treatment. I understand that all attempts will be made to contact me at the listed telephone numbers, but treatment will not be delayed because I cannot be contacted. I further authorize any physician, hospital, or medical attendant to receive full and complete medical reports or information deemed necessary by them with respect to the treatment of my child. Execution of this document shall operate as an authorization for such person(s) to receive any medical information that they require.

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

### **Person to contact in case of an emergency if parent/guardian cannot be reached first**

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

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

Does your child have any special needs that we should be aware of? Yes \_\_\_ No \_\_\_

If Yes, please explain: \_\_\_\_\_

Is your child currently taking any medications? Yes \_\_\_ No \_\_\_ If yes, please explain and include names of medications: \_\_\_\_\_

Allergies: \_\_\_\_\_