

Mayor Antonia Ricigliano,

The Edison Council

The Edison Recreation Department
Present
The 24th Annual



TOWNSHIP HALLOWEEN SPOOKTACULAR

Saturday, October 22, 2011 11:00 a.m. to 1:00 p.m. ~~ Rain or Shine Costume Contest - Begins at 11:45 a.m. Sharp!

at The Stelton Community Center - 328 Plainfield Ave.

For EDISON Children Age 2 - 8th Grade & Families



~Costume Contest ~ Trick or Treat Goodies ~ ~Ghosts & Goblins ~ D.J. Music/Contests/Games ~ ~Surprises ~ Pumpkin Decorating ~ Souvenir Pumpkin~ ~ Craft Making Table ~J.P. Stevens Haunted Classroom~



~~ONLY COSTUMED CHILDREN MAY PARTICIPATE~~

All children must be pre-registered to join in the festivities.

COST OF ADMISSION IS A BAG OF NON-PERISHABLE ITEMS OF FOOD, WHICH MUST BE PRESENTED AT TIME OF REGISTRATION.

Pick up all information and your admission bracelet at registration.

~~ BRACELETS WILL NOT BE GIVEN OUT AT THE EVENT~~

In person registration ONLY - No mail in registration

Registration will be held from Monday, September 19th through Friday, October 21st from 8:00 a.m. to 4:30 p.m. and Saturdays through October 15th from 9:00 a.m. to 4:30 p.m.

Register at either

The Stelton Community Center, 328 Plainfield Avenue, Edison or The Minnie B. Veal Community Center, 1070 Grove Avenue, Edison WWW.EdisonNJ.org

For further information or ADA concerns,

Please call the Edison Recreation Dept. 732-248-7313 or 732-248-7316.

Office Use Only:	Employee Initials:	
Date Received:		
·		

Please Print - One Name Per Slip

Name:		School:	
Age:	Grade:	Male/Female:	
Address:		City:	Zip:

Home Telephone #: Emergency #:

I hereby give permission for myself/my child to participate in this activity and assume the risk thereof and I do agree for myself/my child at all times to keep the said Recreation Department, Personnel and the Township of Edison free, harmless and indemnified from any and all liability for any injury I/my child might sustain as the result of said participation. Photographs, videotapes, and audio recordings of the participant, while participating in an Edison Recreation Department Program may be made. I hereby permit consent and authorize such materials of myself/my son/daughter as an individual or part of a group with or without text, to be used for Edison Township Recreation Activities. It is further understood and agreed that Edison Township does not provide any insurance coverage for the participant or organization.

Parent's Email:		

Parent/Guardian Signature: Date of Signature

Event: Halloween Spooktacular Date of Event: October 22, 2011

S:hallopar 8/11/11 dwt