

**Fabulous Fridays are for finding more chances to learn and play- OUTSIDE!  
Winter Frolic Fun With Frosty Day**



**Grades K-5** Come join us for a fun-filled day with crafts, activities and games having to do with everyone's favorite Snowman, Frosty! 9AM -3PM Two Harbors Community Center. Crafts, sliding on Winter Frolic Hill, sloppy joe lunch (courtesy of Socially Active Seniors--SAS), movie, snowman pictures, hot cocoa and snack = fun! Bus will leave Wm Kelley School at 8:15 AM. (Bus cost \$3.00 additional). Returns at 3:45. Scholarships available for free and reduced families. Call CE office to inquire.

\*Also looking for Teen Volunteers (ages 13 + up) to help out with this event. Call 834-8201 ext 8223.

[www.isd381.k12.mn.us](http://www.isd381.k12.mn.us)

**Just Click on Fab Fridays/ Youth Activities on the district homepage**

**Cost is \$5. Don't forget attached liability form. Return to CE Offices.**

**Bus from Wm Kelly a \$3 additional charge.**

**Cost a factor? SCHOLARSHIPS are available for families on free or reduced lunch or special circumstances.**

**Not on Free or reduced lunch? Parents and Grandparents: If you volunteer to chaperone for the day you can get half price for a child on a future day offering! (Background Check required - no cost to volunteer)**

**Many thanks to our partners! (Socially Active Seniors are supplying lunch) and the Lloyd K. Johnson Foundation is helping to cover transportation costs! The Two Harbors Area Fund and the Silver Bay Charitable Foundation contribute scholarship funds.**

**The bus will leave from Wm Kelley at 8:15 AM, afternoon pick up at WKHS 3:45 PM**



## Winter Frolic Fun With Frosty Day Feb. 11<sup>th</sup>, - 9-3 PM

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Parent Work Phone \_\_\_\_\_

\$5 registration, an additional \$3 for bus from Silver Bay

Amount Included: \_\_\_\_\_. Check # \_\_\_\_\_

Call CE offices for scholarships.  
218-834-8201 ext. 8227 ext 8230  
or 218-226-4437 ext 8137

### **Parent/Child Consent Form Lake Superior School District/True North AmeriCorps/Wolf Ridge Environmental Learning Center**

I hereby give my permission and approval for the children named below to participate in all programs and activities sponsored by or related to the Lake Superior School District/True North AmeriCorps program (includes tutoring programs and Fabulous Fridays). I assume all inherent risks and hazards incidental to such participation (including transportation) and release Lake Superior School District and AmeriCorps (including all staff members, event sponsors, partners, participants and volunteers) from any claims arising from an injury to my child(ren).

Please sign here \_\_\_\_\_ Date \_\_\_\_\_

**EMERGENCY MEDICAL TREATMENT AUTHORIZATION** As parent or legal guardian I do hereby grant authority and permission to Lake Superior School District/True North AmeriCorps program to seek and permit medical care and treatment for the children listed above in emergency situations where the medical care provider is unable to contact either me or the emergency contact person.

Child's Name

Please check to authorize Treatment Authorization

Yes\_\_ No\_\_

Medical Insurance Carrier & Policy #:

Name of Doctor

Phone #:

Hospital/Clinic

Phone #:

Name of Dentist

Phone #:

**Any Special Medical Problems/Medication Needs**

**Allergies**

**Physical Limitations**

**Please describe in detail**

PHOTO CONSENT

Yes \_\_ No \_\_

Please check

EMERGENCY CONTACT PERSON:

PHONE:

ADDRESS

**A photocopy or fax of these authorizations may be used in lieu of the original to obtain and request the information and documents stated herein.**

**I have read all the information and my signature below is a consent for each of the release categories. If this form has been completed online, I understand that it's submission is my consent.**

PARENT GUARDIAN/SIGNATURE - Please print full name and sign  
Print:

Signature:

DATE:

PHONE:

HOME PHONE, CELL AND WORK NUMBER

