

2023 AMHERST SAFETY TOWN

The Amherst Safety Town program will be held the weeks of June 12th and June 19th. Morning and afternoon sessions are offered each week. Class size is limited to 30 per session and are filled on a first come, first serve basis. Session preferences are not guaranteed. Participating children <u>must</u> be entering Kindergarten in the Fall of 2023 and reside within the Amherst School District.

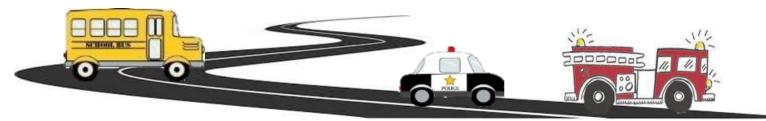
Classes meet at the Amherst Beaver Creek Metro Park, behind the police station, at 913 North Lake Street, and will be held rain or shine. Class instruction will be directed by the School Resource Officers, Ryan Lamb and Sean Gawlik.

Children should wear weather/activity appropriate clothing and shoes. For safety reasons, no flip flops or open-toe shoes are permitted. Please help your child learn his/her name, address, and phone number before coming to Safety Town.

Complete the attached registration and KidPrint forms and return to the Amherst Police Department by May 5, 2023. A \$30.00 fee is required at the time of registration, which includes a T-shirt and daily snack for each child. Payment can be made by cash, check, or money order (made payable to **Amherst Safety Town**). Forms and payment can be brought in or mailed to Amherst Safety Town, 911 N. Lake St, Amherst, OH 44001.

Parents will be notified by email as to what session your child will be attending. Class confirmation notices will be sent to the email address provided within 2 weeks of receiving your forms. If you do not receive anything to your Inbox, please remember to check your junk/spam folder also.

For any questions or further information, please contact Dispatcher Valerie Cruz at 440-988-2625 or email vcruz@amherstpolice.net.



2023 Amherst Safety Town Registration Form

Signature of parent or legal guardian



Please print clearly and complete all information Child's name: ______ DOB: Sex: Address: _____ City: _____ Phone: Email: Parent(s) name: My child will be attending Kindergarten at: ☐ Powers ☐ St Joe's ☐ Other Allergies / Special instructions: Person(s) authorized to pick up your child other than parent (Grandparent, Relative, Babysitter, etc.): Name: Phone: **Child's T-shirt size**: ☐ Small (6-8) ☐ Medium (10-12) ☐ Large (14-16) WEEK 1 WEEK 2 Morning Session Afternoon Session Morning Session Afternoon Session June 12 - 16 June 12 - 16 June 19 - 23 ▮ June 19 - 23 1:00 pm - 3:00 pm 1:00 pm - 3:00 pm Please number each of the above sessions with 1, 2, 3, and 4 to indicate your preferred choice of classes. Sessions are filled on a first come, first serve basis. Preferences are not guaranteed. Amount Due - \$30.00 (make checks payable to Amherst Safety Town) The Amherst Police Department requests permission to use any photos/video that may be taken of your child during the Safety Town classes for publication on our website, social media pages, bulletins, and/or communications to highlight the Safety Town program. ☐ YES - I give permission to use photos/video of my child's for uses stated above. I fully knowledge, consent, and waive all claims for compensation for use or damages. □ **NO** - I **do not** give permission to use photos/video of my child. I give permission for my child to participate in Safety Town. I accept full responsibility for my child and will in no way hold the City of Amherst responsible for any injury to my child while attending Safety Town. I will pick up my child promptly at the end of each session.

Date



Parental Consent Form AMHERST POLICE DEPARTMENT

Please fill out the below listed information and submit to the Amherst Police Department in order for your child to receive his/her **Kidprint** Identification Card.

| | | | Date: | | | |
|---------------------------------|----------------|----------|------------------|-----|------|-----|
| Child's name: | | | | | | |
| Child's date of birth: _ | | | | | Sex: | |
| Child's weight: | lbs | | Child's height: | | ft | ins |
| Child's hair color: | | | Child's eye cold | or: | | |
| | | | | | | |
| | | | | | | |
| Parent's name(s) – printed as | vou want it to | annoar | on card | | | |
| raient's name(s) – printed as | you want it to | о арреат | on card | | | |
| Address | | | | | | |
| City | State | Zip | Phor | ie | | |
| | | | | | | |
| Signature of parent or legal of | guardian | | | | | |