



**CALLING ALL
SUPERHEROES!**

POW!

BAM!

Reg. #	Day(s)	Time(s)	Date(s)
Child Ticket 0-9yr #151303-A	Sat	1:30-3:30pm	(Feb. 25, 2012)
Adult Ticket 10yr+ #151303-B	Sat	1:30-3:30pm	(Feb. 25, 2012)

LOCATION: HCC ARCC Gymnasium

Fee (per ticket): **EVERYONE MUST HAVE A TICKET TO ENTER**
\$5.00 Child Ticket (ages 0-9yr)
\$2.00 Adult Ticket (ages 10yr+)

SUPERHEROES DAY PARTY!
SATURDAY FEBRUARY 25, 2012
1:30PM-3:30PM

Calling all Superheroes! Please join the Washington County Recreation Department for a family-friendly Superheroes Day at the Hagerstown Community College ARCC Gymnasium! Children 9 years old and under and their families are invited to don the costume of their favorite Superhero and participate in themed activities and games. Children will take pleasure in balloons; posing for photos with Superheroes, spending tokens in the bat cave, getting temporary superhero tattoos, and watching a magic show. Children will also have an opportunity to swoosh around in the inflatable moonbounce; spider their way around the arena; and take home party favors! In addition, the little superheroes will be powered by snacks and drinks. Costumes are encouraged and will be showcased in a parade of Superheroes at 3:20!

Registration Form can be found on page 25. For additional information call 240-313-2805 or visit www.washco-md.net
EVERYONE MUST HAVE A TICKET TO ENTER. NO TICKETS SOLD AT DOOR! If weather is a concern it is the participants responsibility to call the Weather Hotline for cancellation announcements.
WEATHER HOTLINE: 240-313-2811.

REGISTRATION FORM

Washington County Recreation Department

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Please fill out following registration information completely

Primary Guardian Name	Date-of-Birth	Gender	Home Phone #	Cell Phone #	Work Phone #
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Home Address	City	State	Zip
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Secondary Guardian Name	Date-of-Birth	Gender	Cell Phone #	Work Phone #
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PROGRAM REGISTRATION # (6 Digit number & letter listed with each program description)	PROGRAM TITLE	NAME OF PARTICIPANT	GENDER (M/F)	DATE OF BIRTH	FEE
					\$
					\$
					\$
					\$
					\$
					\$
Please pay by check, cash or money order. No credit or debit cards accepted. Make checks payable to: Washington County Treasurer.					Add up your TOTAL FEES: \$



E-mail Address: _____

Authorization for use of Visual Likeness: I do hereby consent and agree that the Washington County Recreation Department, it's employees and agents have the right to record visual images of the above individual (s) for the purpose of promoting and publicizing Department programs and events, and warrant that I have the authority to do so on their behalf. I hereby release to the Department all rights to exhibit this work in print and electronic form and waive any rights, claims, or interest they may have to control or receive compensation for the use of any likeness in whatever media used.

Waiver of liability for injuries: I understand that accidents may occur during participation in the recreation programs in which the above individual (s) are enrolled. I assume for them by their participation in these programs, the risk of injury or death. I will inform the Recreation Department of any injury as soon as practicable. I agree to release, hold harmless, indemnify, and covenant not to sue the Department, the County Commissioners, Washington County Public Schools, their agents, employees and volunteers for any loss or liability that may result or any claims that may arise out of these programs.

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Signature of parent/guardian

Date

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Drop off or Mail to:
 Washington County Recreation Department
 11400 Robinwood Dr. Hagerstown, MD 21742
 located in the ARCC gymnasium on the campus of
 Hagerstown Community College
 2nd Floor Room 227