

ROCK 'N' ROPES PROGRAM

EASTON RECREATION DEPARTMENT

6 WEEK ROCK'N'ROPES PROGRAM FOR EASTON RESIDENTS

The mission of Maplewood Rock'N'Ropes is to introduce children to team-building, personal enrichment, and leadership skills through Indoor/Outdoor Adventure/Ropes Course and Rock Climbing Wall.

ROCK'N'ROPES WHERE KIDS BECOME ROCK STARS

Nothing can beat the immediate thrill and satisfaction of a successful climbing experience. Many kids are natural born climbers and Maplewood's 25-foot climbing wall and ropes course is more than just an indoor and outdoor vertical playground. Rock'N'Ropes provides children a safe, fun opportunity to build strength, endurance, balance, self-discovery, communication, collaboration and problem solving.

Rock 'N' Ropes, closely adheres to the "Challenge by Choice" philosophy, which allows each participant to choose his/her level of adventure while being closely guided by our professionally trained staff.

LOW ELEMENTS (Indoor & Outdoor):

Low Course Elements challenge children to climb, balance, swing, or maneuver through a series of obstacles only a few feet off the ground. Participants develop trust in each other and learn to rely on the team for support. A combination of activity, as well as group discussion, aid in strengthening communication, problem solving, and decision-making skills among group members.

HIGH ELEMENTS (Indoor):

High elements (15-30 feet in the air) challenge individuals both physically and emotionally, and encourage participants to try something new for the benefit of personal growth and increased self-esteem.

6 WEEK PROGRAM INFORMATION:

DAYS / DATES

Tuesday: Jan. 31st - March 14th or

Wednesday: Feb 1 - March 15th

GRADE: K-5th

CLASS TIME: 4:00-5:00 PM

Parent drop-off or have your child take the Maplewood bus from school

PRICE: \$120.00



HOW TO SIGN UP:

- 1) Please fill out form
- 2) Sign release
- 3) Enclose a check for \$120 payable to the Town of Easton
- 4) Mail to: Easton Recreation Department
15 Barrows Street, N. Easton, MA 02356
- 5) *A Maplewood packet is required to be completed and returned prior to or on your child's first class. (see reverse for link)

NO CLASSES - FEBRUARY 20th-24th / WE WILL BE RUNNING OUR FEBRUARY VACATION PROGRAM

Contact info@maplewoodyearround.com or 508-238-2387 for details.

REGISTRATION
DETAILS ON
REVERSE SIDE



Name: _____ AGE: _____ Grade: _____

Address: _____ City: _____ Zip: _____

Parent / Guardian: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Please check which day you will be attending: Tuesday OR Wednesday

Transportation (Maplewood Bus from school) YES - SCHOOL NAME: _____

NO / Child pick up at Maplewood by 5:00 pm

* All participants are required to complete a Maplewood Packet. This can be accessed on our website @ <http://www.maplewoodyearround.com/dates-and-forms/school-year/forms/>

TOWN OF EASTON VOLUNTARY CONSENT AND RELEASE FORM (Students Under 18)

I, _____ the undersigned parent/guardian of _____ a minor, do hereby consent to my child's participation in the _____

offered by the Town of Easton. I agree and covenant to forever release, acquit, discharge and hold harmless the Town of Easton and all their employees, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary athletic or recreation programs/activities of the Town of Easton from any and all claims of any nature whatsoever, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from any and all known or unknown personal injuries to my child or property damage resulting from or in any way growing out of, directly or indirectly, and which my said minor child has or hereafter may acquire, either before or after he/she has reached his/her age of majority resulting from my child's participation in the above-described voluntary activities occurring on the property of the Town of Easton's voluntary athletic or recreation programs/activities. I hereby forever, release, indemnify, defend, and hold harmless the Town of Easton against any and all legal claims of any nature or kind whatsoever and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to my child or property damage resulting from my child's participation in the Town of Easton's voluntary athletic or recreation programs/activities. I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that my child's participation in these programs/events is voluntary and that my child and I are free to choose not to participate in said programs/events. By signing this Form, I affirm that I have decided to allow my child to participate in the above described Town of Easton's athletic or recreation programs/activities with full knowledge that the Town of Easton will not be liable to anyone for personal injuries and property damage my child or I may suffer in the above-described voluntary activities.. As parent/guardian of the above-named minor child, in any absence, I hereby authorize the Town of Easton to transport the minor child to a hospital or to place him/her in the care of an ambulance attendant(s) for transportation to the hospital and give my consent for emergency medical care by a licensed Doctor of Medicine or Dentistry as may be warranted to preserve the well being of my child.

Signed: _____ Parent or Guardian of: _____

Dated: _____ Medical Insurance Policy No. _____

**FEBRUARY & APRIL VACATION PROGRAM • AFTER SCHOOL • SUMMER CAMP
CHILDREN'S CLASSES • PRESCHOOL • BIRTHDAY PARTIES**



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