



Hello!

I hope this letter finds you in good health and enjoying your school year. I am writing this to you in regards to Safety Town 2010. This year, Safety Town is taking place from **June 16-24** at Shawnee Elementary School. We are also going to have a meeting prior to Safety Town as well as the mandatory set up day on June 15.

You are probably asking yourself “Why am I getting a letter about Safety Town in January?” This is for a couple of reasons. First, because you did such a wonderful job as a counselor last year, we were wondering if you would be returning next year. It will also help determine how many volunteers we are going to need for this year.

We also realize that you are a **huge** reason why Safety Town is so successful. Without your volunteer efforts, Safety Town would be virtually impossible to run. We would love to have an experienced and helpful counselor like you to return and help us out this summer.

Please fill out the attached forms regarding your interest in Safety Town this year. Please return this form by **February 12**. If we do not receive this form, we will assume that you are not interested in returning.

Mail form to:

Huron Parks and Recreation
417 Main Street
Huron, OH 44839

If you have any questions about this letter or anything regarding Safety Town, please feel free to give us a call at 433-8487 ext 220 or email us hprd@cityofhuron.org

Thanks! Have a great day!

Brian Croucher
Recreation Manager
bcroucher@cityofhuron.org
www.huronparks.org



**Huron Safety Town
Returning Counselor Form**

Name _____ Phone # _____

Address _____ Email: _____

Age _____ Grade _____ School _____

Shirt Size (These are Adult Sizes): S M L XL XXL
Please circle one:

Yes, I can't wait to return to Safety Town this year!

Or

No, I will not be returning to Safety Town this year.

Please read the following.

I understand that by returning as a Safety Town Counselor, which is a volunteer service, I will be on duty a total of 8 days (7 days of classes and the first day for set-up and instruction).

WAIVER FOR PARTICIPATION:

I recognize and acknowledge that there are certain risks of physical injury to participants in the above program(s) and I agree to assume the full risk of any such injuries, damages or loss regardless of severity, which I or my or child/ward may sustain as a result of participating in any activities connected or associated with any such program(s). I waive and relinquish all claims I or my child /ward may have against the City of Huron and its officers, agents, servants and employees as a result of participating in any of the above program(s). I hereby fully release and discharge the City of Huron and its officers, agents, servants and employees, from any and all claims from injuries, damages or loss which I or my child/ward may have or which may accrue to me or my child/ward on account of my participation or the participation of my child/ward in any of the above program(s). I further agree to indemnify and hold harmless and defend the City of Huron and its officers, agents, servants and employees from any and all claims resulting from injuries, damages, losses sustained by me or my child/ward, and arising out, connected with, or in any way associated with the activities of any of the program(s). I have read and fully understand the above program details and waiver and release of claims.

I understand that I or my child may be photographed or videotaped while participating in the above program(s). I give permission for photos and videotapes of me or my child to be used to promote the City of Huron and it's Parks and Recreation Department and such photos and video will be the property of the City of Huron.

In the event of an emergency requiring medical treatment, I give my permission to the program instructor, coach, and/or league director to obtain medical treatment they feel is necessary and to call the local EMS if necessary. I understand that no medical or accidental insurance will be provided to participants.

SIGNATURE REQUIRED _____ DATE _____
(Participant Signature Required-IF UNDER 18, Parent/Guardian Signature REQUIRED)