

Vinton Parks & Recreation Department

Daddy Daughter Date Night

Date: Saturday, February 4, 2012

Grades: K - 6th

Time: 5 - 7 pm

Location: Skate & Activity Center

Cost: \$10/couple, each additional daughter is \$5

♥ Fathers and daughters, grandfathers and granddaughters, uncles and nieces are invited to enjoy an evening of fun, music, dancing and refreshments.

♥ It is a great opportunity for fathers to spend some quality time with his daughter(s).

♥ All girls will receive a flower and a picture taken with their date.

♥ We will have dinner items for purchase including pizzas, hot dogs and burgers.



DUE DATE: Wednesday, February 1, 2012. Event available only for V/S School District youth.

Please mail or bring registration form to the Vinton Recreation Center at 701 E A Street.

Questions please call 472-4164.



Daddy Daughter Date Night 2012

Daughter Name (s) _____ Grade(s) _____

Street Address _____ City _____ Zip Code _____

Home Phone _____ Cell Phone _____

Name of Adult _____ Relationship _____

1. I/we recognize that as participants or observers I/we shall bear the full responsibility of any loss or theft of personal items while engaging, participating, or observing in these activities. 2. I/we release any photographs, videos, or both taken during the activity to be used by the City of Vinton for advertisements, training, or other purposes. 3. In the event of injury or illness, I hereby give my consent for medical treatment and permission to program staff for supervising and performing, as deemed necessary by staff, on-site first aid for minor injuries, and for a licensed physician to hospitalize and secure proper treatment (including injections, anesthesia, surgery, or other reasonable and necessary medical and necessary procedures) for me or my participant or observing spouse, if I am unable to provide that consent directly at the time, for any reason. I agree to assume all costs related to any such medical or surgical treatment. I also authorize the disclosure of medical information to my insurance company for the purpose of this claim.

Signature of Parent/Guardian _____ Date _____

Make checks payable to Vinton Recreation Center
Mail Completed Form & Check to:
Vinton Parks & Recreation Department, 701 East A
Street, Vinton, 52349
*Additional forms available at vprdzone.com

Office Only:	
Fee: _____	Total Due: _____
\$3 Late fee after 2/1: _____	Date Paid: _____
	VPRD Initials: _____