

# Ridgewood Parks & Recreation and HealthBarn USA

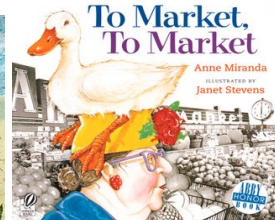
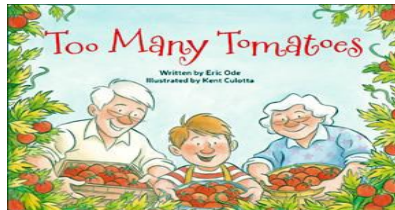
## Storytime and Garden Adventure<sup>®</sup>

Come to HealthBarn USA, in partnership with the Ridgewood Parks & Recreation Department, to participate in a specially designed autumn Storytime & Garden Adventure for children ages 2-4 years old and the grown-ups who love them!

Each week, we will read a literary favorite together in the Gate house, then venture outside for a hands-on garden adventure in the HealthBarn USA organic teaching garden to bring the story to life. From tomatoes to caterpillars, to nibbling on sweet leaves, children and the grown-ups will spark their imaginations and put their newly discovered healthy habits into practice!

The 6-week program will be offered on Monday 's September 16, 23, October 7, 21, 28, and November 4, from either 9:30 -10:15 am or 1:00-1:45 pm. Habernickel Gatehouse, 1057 Hillcrest Road . Registration cost is \$60.00 (\$70 non residents).

Online at [www.ridgewoodnj.net/communitypass](http://www.ridgewoodnj.net/communitypass)



### REGISTER EARLY - SPACE IS LIMITED

Online at [www.ridgewoodnj.net/communitypass](http://www.ridgewoodnj.net/communitypass)

In person or by mail: The Stable, 259 N. Maple Ave., Ridgewood, NJ 07450 Tel: 201-670-5560

Make checks payable to: *Ridgewood Parks and Recreation*

*Refund/Cancel Policy – Payment is non-refundable unless we cancel for rain.*

Child's Name \_\_\_\_\_

Age \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_

Allergies/Conditions \_\_\_\_\_

Emergency Phone: \_\_\_\_\_

\$60 (non-residents \$70) Payment Check # \_\_\_\_\_

Email \_\_\_\_\_

Program: 2019 STORY TIME & GARDEN ADVENTURE 9:30 am \_\_\_\_\_ 1:00 pm \_\_\_\_\_

I, the parent of the above named youth, hereby give my permission to participate in any and all Village approved Recreation activities. I assume all risks and hazards incidental to such participation. I hereby waive, release, absolve, indemnify and agree to hold harmless the organizers, sponsors, supervisors, and persons involved in the activities for any claim arising out of an injury to my child, whether the result of negligence or for any other cause, except to the extent and in amount covered by accident insurance.

Parent / Guardian Signature: \_\_\_\_\_