

Adaptive Recreation “Shadow” Program:

The Adaptive Recreation Program provides trained volunteers to “shadow” individuals during most recreation programs. The shadow works with the specific needs of the individual to help him or her participate more comfortably within the parameters of the program.



STUDENT Shadow Camp Registration Form

Please fill out form completely and print clearly

Name: _____

Address: _____

Home Phone # _____

Your Cell Phone # _____

E-Mail: _____

Grade entering in the Fall (Please circle) 8th 9th 10th 11th 12th College

Emergency Information:

Emergency Contact Name: _____

Emergency Contact Phone #: _____

Availability: Please Circle Day(s): M T W Th F

Time(s) available: Circle all that apply

Half day AM: 8:30am-12pm Full day: 8:30am-3pm Half day PM: 12:15pm-3pm

Parental Consent:

I give my child permission to act as a Shadow for Senior, Youth & Leisure Services.

Parent's Signature

Name

Date

Please return completed form to:

Jennifer Quirk, Adaptive Recreation Coordinator
SYLS Dept, 204 Hillside Ave, Livingston, NJ 07039

Questions - Call: 973-535-7925, ext. 403 or
email jquirk@livingstonnj.org